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ABSTRACT

This publication of the Iowa State School Workers' Association is dedicated to the enhancement of social work practice in schools. Within the social work profession, school social workers may find themselves on the cutting edge and forefront of issues affecting students. The articles in these journals attempt to provide comprehensive knowledge about human behavior and to help refine social worker's skills to address the concerns they encounter. Included in this series of journals are articles on understanding credentialing of school social workers; the history of the National Association of Visiting Teachers; causes of burnout among school social workers; a legislature's reflections; trauma intervention; and improving services for students with disabilities. Each issue contains numerous references. (JDM)

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Iowa Journal of Social Work, 1994-1998

Cheryl McCullagh and
Gary Froyen, Editors

Volumes 7-10

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IOWA JOURNAL OF SCHOOL SOCIAL WORK

EDITORIAL COMMENTS

Cheryl McCullagh 3

CALL FOR PAPERS 5

ARTICLES

Unraveling the Licensing, Credentialing,
and Certification Maze: A Guide
for School Social Workers
James Clark 6

Cognitive-Behavioral Treatment of
Attention Deficit Hyperactive Disorder
with an Elementary School Student
Thomas Kremer 16

National Association of
Visiting Teachers: The
Early Years, 1916-1930
James McCullagh 31

Cal-Pal Update
John Wilson 66

BOOK REVIEW

War Against the Schools:
Academic Child Abuse
Kate McElligatt 71

EDITORIAL COMMENTS

The Iowa Journal of School Social Work is heading into its 9th year of production, thanks to a dedicated Editorial Board, a consistent readership, a strong article contributorship base, and the ongoing support of social work professionals who are committed to school social work practice. School social work is highly complex and challenging. Within the social work profession, school social workers find themselves on the cutting edges and frontiers of the profession. We engage daily with the emergence of societal trends and movements as these find expression in the schools. We deal with "grass roots" existence and concerns.

School social workers need comprehensive knowledge about human behavior and a broad spectrum of refined skills to address the concerns that are encountered. So often, we confront ourselves with the question, "If I do not advocate for this child and family, who will?" We recognize that if we do not advocate or risk for children, we become partners with the systems, movements, or trends that exploit them or may destroy them. Our world view among professionals is unique, in that we "start where the client is" as we work for positive change and growth.

As a professional group, we need to evaluate ourselves continually in order to grow and mature. We owe so much to the forerunners of our profession who paved the way for us. In this day, significant questions face us:

1. What language do we use to communicate more effectively with those who touch the lives of children?
2. What is the most effective language of empathy, problem solving, conflict resolution, or peacemaking to precipitate individual and system change?

In the face of significant monetary cutbacks, which will affect service delivery, we must look closely at our service delivery systems and approaches in the school. We must support strongly those licensure and certification standards that ensure quality practice.

As we see IJSSW's landmark decade of existence on the horizon, we are looking toward expansion. We are calling for papers that focus on innovative practice. We are urging research and replication of research studies to ensure practice integrity. We are soliciting book and film reviews and letters to the editor. Complimentary issues of this Journal will be sent to accredited social work programs throughout the nation with the hope that they will choose to subscribe and contribute to our effort. We urge readers to solicit subscriptions and relevant papers from professional friends and colleagues who share our interests and commitments. If anyone is interested in serving as a Book Review/Film Editor or serving on the Editorial Board, please contact us. We are looking for leaders in school social work from across the nation.

In closing, appreciation is extended to Pat O'Rourke, Director of Special Education, Iowa Area Education Agency 7 (AEA 7), who supports the production of this journal and has made the AEA 7 production services available to us. Special thanks is extended to Oletha O'Donnell, AEA 7 Word Processing Specialist III, who literally has become a partner in this publication endeavor. Thanks also is extended to Sandy Lawry, AEA 7 Student Records Specialist IV, who works with us to update our subscription list.

Cheryl McCullagh
Manuscript Editor

CALL FOR PAPERS

Innovations in School Social Work Practice

The Iowa Journal of School Social Work invites authors to submit papers to be considered for inclusion in a special issue or issues devoted to Innovations in School Social Work Intervention. Papers must be received by August 20, 1994. Send papers to IJSSW, P.O. Box 652, Cedar Falls, IA 50613. The length of papers may vary from 1 to 16 double-spaced typewritten pages.

Shorter papers simply may describe innovations, whereas longer papers should focus on research or theory development and should be referenced. The inclusion of outcome data is encouraged. Interventions may include work with individual students, groups, families, teachers, school systems, or communities.

Please send four copies of submitted papers, a short abstract, and a short "About the Author" statement. A 3 1/2 inch Revisable Form Text format hard computer disc will be appreciated and will be returned. Questions should be addressed to Cheryl McCullagh, IJSSW, Manuscript Editor, Box 652, Cedar Falls, IA 50613.

UNRAVELING THE LICENSING, CREDENTIALING,
AND CERTIFICATION MAZE: A GUIDE
FOR SCHOOL SOCIAL WORKERS

James P. Clark

ABSTRACT

This article describes the various licensing, credentialing, and certification systems encountered by school social work practitioners. School social workers must develop a clear understanding of the structure and operation of these systems in order to meet increasingly complex regulatory requirements. As a guide and tool for the school social work practitioner, a summary table is provided, which includes essential information about these requirements.

Regulation of the social work profession via professional licensure, certification, and credentialing has increased dramatically in the past 2 decades. Increasing numbers of states have enacted licensing laws for social workers and state certification systems for school social workers. In addition, the National Association of Social Workers (NASW) and the American Board of Examiners in Clinical Social Work have developed a number of professional credentials that attest to the specialized practice expertise of social workers who practice clinical social work in a variety of settings. Also, more recently, NASW has developed the organization's first specialty practice area credential, the School Social Work Specialist credential.

The proliferation of these licensing and credentialing systems has resulted in an increasingly complex and often confusing maze of requirements

and procedures that are difficult for school social work practitioners to understand and to negotiate. This article describes and summarizes these systems and their related requirements in an effort to provide school social work practitioners with a guide for understanding their structure and processes. Table 1 provides a summary of the essential features of the systems that are discussed in this article.

LICENSING

According to NASW (1993), all states, with the exception of Hawaii, now have established some type of regulation of social work practice, i.e., licensure, registration, or certification. In Iowa, with the passage of licensure legislation in 1984, the first statutory regulation of social work was established. The Board of Social Work Examiners was created to govern the licensure process.

Current licensure requirements include (a) a master's degree in social work from a college or university accredited by the Council on Social Work Education, (b) validated evidence of 2 years of post masters social work experience, and (c) a passing score on the clinical level exam of the American Association of State Social Work Boards. Social workers meeting these requirements may use the designation "LSW" (Licensed Social Worker). Twenty-four clock hours of continuing education must be completed every 2 years in order to renew the license (Board of Social Work Examiners [280], Iowa Administrative Code).

Though the types and requirements of licensure systems vary from state to state, the common purpose of professional licensure is to provide a method by which the public can be protected from those who would practice illegally or unethically

and in a manner that could harm clients who receive services from the profession. For the social work profession in Iowa, this is the primary responsibility of the Board of Social Work Examiners. Under requirements of the current law, social work licensure in Iowa is voluntary, i.e., there is no particular requirement that social workers hold the license; but, if they do, they must meet all requirements of the law and its implementing regulations. In effect, this means that the Board of Social Work Examiners has no jurisdiction to act on complaints received against social workers who legally choose to practice without a license.

Dissatisfaction with this limited ability to adequately protect the public from social workers who practice illegally or unethically has prompted a recent initiative to develop legislation to amend the current law to make licensure mandatory and application to social workers at all levels of training, i.e., BSW, MSW, and Ph.D. or DSW. The Iowa School Social Workers Association has joined with the Iowa Chapter of NASW and other social work specialty associations in forming a coalition for this purpose. The social work licensure bill (SF100) will be considered by the Iowa Legislature during the spring 1991 session.

CREDENTIALING

Social work credentials are the means by which professional organizations recognize social workers' competence to practice at certain levels or, in particular, specialized fields of practice, such as clinical social work or school social work. For example, the NASW Academy of Certified Social Workers (ACSW) attests to the ability of

IJSSW, April 1994

Academy members to independently practice social work. For clinical social workers, examples include the Diplomate in Clinical Social Work and the Qualified Clinical Social Worker credentials issued by NASW and the Board Certified Diplomate in Clinical Social Work credential issued by the American Board of Examiners in Clinical Social Work.

Most recently, NASW has developed the School Social Work Specialist credential. This is an effort to recognize those social workers who have demonstrated minimum knowledge, skills, and abilities in the specialized practice area of school social work. Credential requirements include (a) the MSW degree, (b) 2 years of school social work practice experience, (c) recommendation from the school social worker's supervisor, and (d) successful completion of the school social work subtest of the National Teachers' Exam (NASW, 1990).

This credential currently is not a requirement for obtaining licensure in school social work in any state. It is anticipated that some states will soon begin to incorporate some or all of the credential requirements into state school social work certification or licensing requirements. It is important to note that, at this time, none of the above-noted professional credentials are prerequisites or requirements for licensure as a social worker or as a school social worker in Iowa.

SCHOOL SOCIAL WORK LICENSING

Recent national survey data collected by Shaffer (1990) indicate that 32 states have some procedure for licensing or certifying school social work practitioners. At least 4 additional states indicate they are currently in the process

of advocating for the establishment of such requirements. Specific requirements vary from state to state, but these data indicate that 23 of the 32 states who certify or license school social workers identify the MSW degree as the minimum educational requirement, and 7 additional states identify the MSW degree or alternative degree options. Three states require only the BSW degree.

In Iowa major revisions of the system for certifying all school personnel went into effect on October 1, 1988. Prior to this time school social workers were granted permission to practice in Iowa schools through the issuance of a Statement of Professional Recognition (SPR). The only requirement for the SPR was the MSW degree. There were no renewal requirements.

The Iowa School Social Workers Association worked collaboratively with the Iowa Department of Education throughout the early 1980s to develop a certification procedure for school social workers that would include requirements for graduate course work specific to school social work practice. Social work, education, and special education courses were selected for inclusion in an "approved program" for school social work certification at the University of Iowa, because this university has the state's only graduate level social work program. Graduate students who complete the required courses in the approved program are eligible, upon receipt of the MSW degree, for certification as a school social worker at the recommendation of the University. The intent is to create a certification procedure similar to that required of teachers, i.e., a procedure that emphasizes specific pre-service preparation of the professional and that recognizes the specialized nature of school social work practice.

The approved program for school social work certification was developed with the intent of replacing the SPR procedure. Due to concern

regarding whether the new procedure would adversely affect the supply of qualified school social workers in its initial implementation period, it was decided that the SPR would be retained as an optional route for social workers who might not meet all of the approved program requirements. Two additional requirements will be included. Effective October 1, 1988, to be eligible for an SPR, a social worker must (a) hold an MSW degree, (b) hold a social work license issued by the Board of Social Work Examiners (LSW), and (c) complete an approved human relations course. The addition of the renewable LSW requirement was intended to assure ongoing professional development. The addition of the human relations course requirement was the result of a statutory change that added this requirement for all school personnel. At this time it is not clear whether retention of the SPR option has actually prevented a decline in the supply of qualified school social workers. Recent data do suggest that, while the qualified applicant pool appears to be shrinking slightly, school social work programs still are relatively successful in filling vacant positions (Clark 1992).

A significant change in the state governance system for certifying school personnel, including school social workers, occurred in 1989 with the passage of legislation that created the Board of Educational Examiners. Comprised primarily of educators, this Board has the authority to establish licensing standards for all school professionals. Prior to the creation of this Board, this authority rested with the Iowa State Board of Education, which is comprised of lay persons appointed by the Governor of Iowa.

In discussing the Iowa State Education Association's long and persistent legislative effort to establish the Board of Educational Examiners, Comer (1993) points out the "self-governance is the essence of a profession" (p. 122). Thus, the

Board of Educational Examiners now sets regulatory standards for the profession of teaching in much the same manner that other professional licensing boards establish standards for their respective professions, e.g., the Board of Social Work Examiners, the Board of Medical Examiners, etc.

When the Board of Educational Examiners was established, the previously used term "certification" changed to "licensure." This can be confusing for school professionals who are not teachers and who have also been licensed by their respective professional licensing boards, e.g., school social workers who may be licensed by the Board of Social Work Examiners, school psychologists who may be licensed by the Board of Psychological Examiners, etc. Thus, some school social workers currently hold a school social work license issued by the Board of Educational Examiners and a social work license (LSW) issued by the Board of Social Work Examiners. This arrangement is sometimes referred to as "dual licensure."

CONCLUSION

Licensing, credentialing, and certification in the social work profession has become more extensive and complex in an age of increasing professional specialization. School social workers can effectively negotiate these systems if they acquire a clear understanding of the requirements of these systems and the authority structures that govern them. Summary Table 1 provides a tool for the school social work practitioner who seeks this understanding.

Table 1

Social Work and School Social Work Licensing and Credentialing Requirements

	Social Work Licensing (Iowa)	Social Work Credentialing	School Social Work Licensing	School Social Work Credentialing
Authority	Board of Social Work Examiners	National Association of Social Workers	Board of Educational Examiners	National Association of Social Workers
State Agency	Department of Health		Independent Board - Department of Education administered	
Designation	LSW	BCD (Board Certified Diplomate) ACSW (Academy of Certified Social Workers) QCSW (Qualified Clinical Social Worker)	Two options: a) Statement of Profes- sional Recognition (SPR) or b) School Social Work License	School Social Work Specialist
Minimum Educational Requirements	MSW	MSW	MSW	MSW
Experience	2 years post MSW	2 years post MSW	None	2 years post MSW supervised experience
Exam	Yes	Yes	None	Yes
Other Requirements	Validation of 2 years of post MSW social work practice	None	a) SPR: LSW, Human Relations course b) License: Completion of approved program	• Ethics agreement • Professional references: Supervisor and colleague
Renewal Requirements	CEUs: 24 clock hours/2 years	BCD - 20 clock hours/year QCSW - fee only ACSW - fee only	a) SPR: None (but maintenance of LSW is required) b) License: Eight renewal units/5 years	30 clock hours of continuing education/ 3 years

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ABOUT THE AUTHOR

James P. Clark is Consultant for School Social Work Services for the Iowa Department of Education, Bureau of Special Education. He has served as a test item writer and as a member of the Subject Matter Expert and Advisory Committees for

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development of the School Social Worker Specialty Test of the National Teachers Examination and was instrumental in the development of the National Association of Social Workers School Social Work Specialist Credential during his appointed tenure as a member of NASW's Competency Certification Commission School Social Work Subcommittee. He currently is Vice-President of the Midwest School Social Work Council, President-Elect of the Iowa Chapter NASW, and serves as a Consulting Editor for Social Work in Education.

Accepted for publication February 1994.

COGNITIVE-BEHAVIORAL TREATMENT OF
ATTENTION DEFICIT HYPERACTIVE DISORDER
WITH AN ELEMENTARY SCHOOL STUDENT

Thomas Kremer

ABSTRACT

Cognitive-behavioral self-control therapy was used to decrease the amount of time that an Attention Deficit Hyperactivity Disordered and behaviorally disordered special education student spent in "time-out." Training by means of a problem-solving plan affected the subject's positive control over problematic behaviors and reduced time spent out of the classroom. Intervention was initiated after a 4-week baseline measure of the amount of time spent in time-out and continued for 6 weeks for a total of 10 weeks. The results of the multiple measure time series design were plotted on a graph and examined to determine the decrease in problematic behavior and the amount of time the subject spent in time-out.

Research was conducted to evaluate the effectiveness of the author's use of cognitive-behavioral techniques to decrease the amount of time that an Attention Deficit Hyperactivity Disordered (ADHD) and behaviorally disordered (BD) self-contained special education student spent in time-out. The student was being treated with methylphenidate medication. Increased time in the classroom translated to increased time that was spent on academic tasks. Time-out translated to time spent out of the classroom and, therefore, time that was not directed toward academic tasks. Additionally, it was expected that the student would exhibit increased compliance to teacher prompts as

the result of the cognitive-behavioral intervention. The effectiveness of intervention was measured after a baseline period was established. The outcome of the self-control training with the research subject was measured by comparing the amount of time that the subject spent in time-out before and after the research activity.

"Time-out" is a term that refers to a period of time that a student spends alone in a secluded area. In this research study a student spent a time-out period when the teacher perceived that the student was behaviorally disruptive to the rest of the class activities. The student remained in the time-out area until the teacher perceived that the student was behaving appropriately for the classroom, at which time the student returned to the classroom.

Inappropriate classroom behaviors exhibited by students often precipitate a referral to the Area Education Agency (AEA 7) social worker for service intervention. Some examples of inappropriate behaviors that provoke referral are constant talking, disruptive noises, noncompliance to teacher prompts, negative peer interaction, physically and verbally aggressive behavior, and lack of motivation to participate in learning activities. Normally, the results of such inappropriate classroom behavior are less time spent on academics for the disruptive students as well as their peers. When these behaviors are exhibited extensively, students who exhibit such behaviors typically are removed from the classroom for a time-out. Being removed from the classroom results in less time for academic training; therefore, when ADHD/BD children are removed often from the classroom, it is assumed that they fall even further behind peers in academic progress if the behavior problems are not reduced effectively. Desired classroom behaviors are compliance to teacher prompts, staying on task, positive peer interaction, and

motivation to complete academic assignments
(Turkewitz, O'Leary & Ironsmith, 1975).

LITERATURE REVIEW

Attention Deficit Hyperactivity Disordered students are diagnosed in accordance with the DSM III R manual (1987). Criteria for identifying ADHD include fidgeting, having difficulty remaining seated, being easily distracted, exhibiting poor impulse control, demonstrating difficulty in sustaining attention, and exhibiting excessive talk (DSM III R, 1987). Although a number of specific symptoms of ADHD have been examined (Borden, 1987), the most prevalent symptom of ADHD that is identified or causes referral for service intervention is a student's difficulty remaining attentive to academic instruction or task completion in the school setting (Waldman & Lilienfeld, 1991).

A study by de Sonnevile, Njokiktjien, and Hilhorst (1991) addressed the effects of using stimulant medications to improve the attention of ADHD students. Subjects were given methylphenidate medication after a baseline of measured attentive behaviors was established. The results of the study showed an increase in sustained attention in the subjects. Similar results were found in a study by Carlson, Pelham, Swanson, and Wagner (1991).

Although medications are used widely to help ADHD students stay focused on schoolwork, medications do not completely eliminate the behavioral effects of the disorder (Stephens, 1984). Teachers often spend excessive time and energy in their teaching day managing ADHD students behaviors rather than teaching the class. Other intervention(s)

such as cognitive-behavioral treatment, in addition to medication, may be useful in helping to manage the behavior. If the student's behavior and attention are controlled more effectively, the student spends more time on academics.

Self-monitoring behavior training, including cognitive-behavioral treatment, has been examined and proven to affect positively the on-task behaviors of ADHD students (Maag, 1992; Gordon, 1991; Horn, Ialongo, Greenberg, Packard, & Smith-Winberry, 1990). The treatment consists of teaching the student to check his/her own behavior, solve problems effectively, and, thus, behave appropriately. The study by Gordon (1991) demonstrated specifically that cognitive training successfully increased the on-task behavior of ADHD students. It should be noted, however, that upon cessation of training, the desired effects dissipated. Similar results were found by Lovejoy and Routh (1988).

Kendall (1985) suggests that the application of cognitive-behavioral training helps to control problem behavior in the classroom. Abikoff and Gittelman (1985) directly address symptoms of ADHD (inattentiveness, impulsivity, and restlessness). In addition to medications, cognitive-behavioral techniques were used in their study to help the research subjects improve behavior and thereby to increase quality class time and academic performance. The authors found that cognitive-behavioral training did not "cure" the subjects' problem behaviors but did increase the amount of time that subjects spent on-task in the classroom. The authors attribute the longer-lasting appropriate behavior to better problem-solving skills and improved self-regulation of behaviors, both of which are cognitive-behavioral trained skills.

Similar results were found by Horn et al. (1990). By using self-control therapy, ADHD children were trained in relaxation techniques and

Cognitive-Behavioral Treatment

problem-solving techniques. Concordant with Abikoff and Gittelman's study (1985), the cognitive-behavioral techniques were shown to have positive effects.

Research by Turkewitz et al. (1975) looked at a cognitive-behavioral approach for maintaining appropriate behavior. The subjects were BD children who demonstrated a difficult time exhibiting appropriate classroom behaviors. The subjects were trained in self-regulation techniques to help them increase their awareness of problematic behavior. After receiving cognitive-behavioral training, the subjects did not improve significantly. When the same techniques, however, were used on students who were also involved in another behavior control method (such as the use of medication), the students' disruptive behaviors decreased dramatically.

RESEARCH METHOD

The primary research question for this study was as follows: "Is cognitive-behavioral training, or, more specifically, self-control therapy effective in helping an elementary ADHD student spend more time in the classroom?" The independent variable was the cognitive-behavioral training, and the dependent variable was the amount of time spent in time-out. The cognitive-behavioral intervention technique was self-control training. The desired behaviors were a decrease in time spent in time-out and more compliance to teacher prompts. Compliance was defined as following adult directives.

Subject

The participant was a 7-year-old male student who was labelled BD, diagnosed as ADHD, and served

in a self-contained special education classroom. The classroom contained 5 students, 1 teacher, and 1 associate teacher. The participant had been taking methylphenidate medication for over 1 year as a single intervention to control his behavior problems and had experienced little success. He was characterized as having frequent behavior outbursts, such as screaming or yelling at teachers and other students and hitting and kicking the teacher and other adult helpers in the class. He also had difficulty attending to his school work. These behaviors caused the student to be sent out of the classroom for time-out. Because of these behaviors, the subject was referred to the AEA 7 social worker.

Clinician

The clinician (author) was a social work practicum student from AEA 7 in Waterloo, Iowa. The agency provides support and special education services to students who have disabilities that affect their academic achievement and for students who are at risk for disabilities. The author's primary responsibility in the school was to provide teachers, students, and parents with assistive techniques to help control children's behavior problems and enhance their learning.

Evaluative Design

The evaluation was based on an outcome-based research design that measured the author's effective use of a cognitive-behavioral model to decrease behavior problems in a specialized class for students who were labeled BD and also diagnosed as ADHD. The effectiveness of the intervention was evaluated by using a time series design measure of a baseline period that continued throughout the intervention period (Alter & Evens, 1990). The baseline consisted of four weekly

Cognitive-Behavioral Treatment

measures of the amount of time that the subject spent in time-out over a 4-week period prior to any intervention. The intervention phase was six weekly measures of the amount of time that the subject spent in time-out after intervention was initiated (see Figure 1). In addition, the problem-solving plan was used when the student was playing simple board games such as "Candyland" and "Shoots and Ladders."

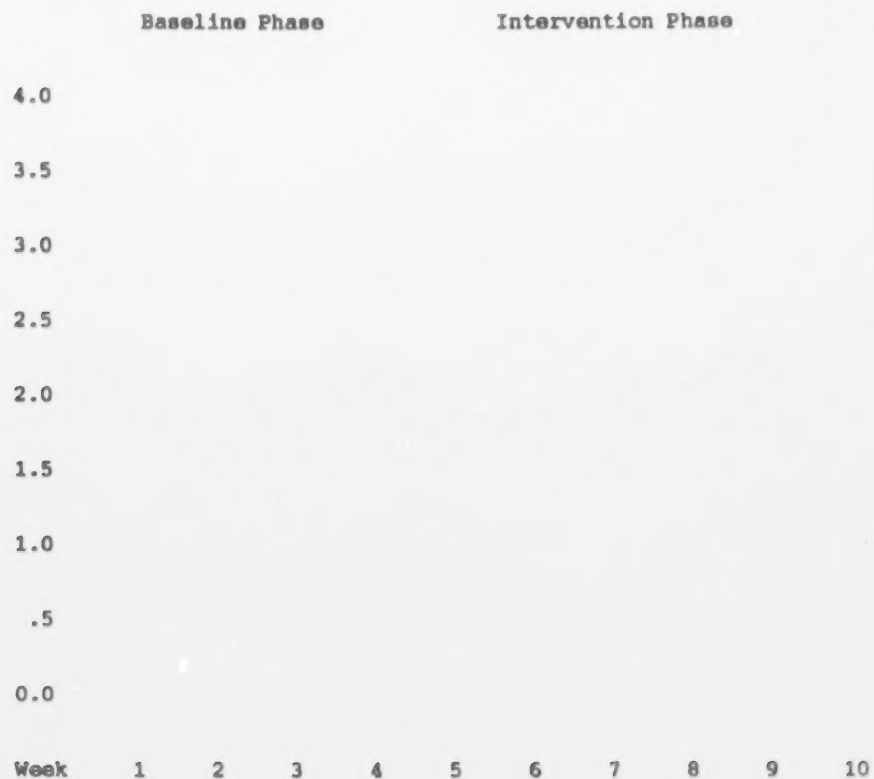
Data Analysis Plan

Collected data were plotted on a graph (Figure 1) to observe the decrease of time spent in time-out. The graph allowed the baseline data to be compared to intervention data. A decrease in time spent in time-out would show that the training session with the subject was successful. If the amount of time spent in time-out remained the same or increased, the data would show that the intervention was unsuccessful. The amount of time spent in time-out was the only data examined to determine the success of the intervention. The rationale for examining this single dependent variable was the frequency in which time-out is used in school settings. Although the amount of time-out was the only data obtained, other observable behaviors were expected from successful intervention. In addition to decreased time in time-out, successful treatment was expected to increase appropriate classroom behaviors, compliance to teacher prompts, and positive interaction with peers.

This time series design provided a measure of the effects of treatment (independent variable) on the amount of time the participant spent in time-out (dependent variable) throughout the evaluation. The effects of treatment were observed by means of the periodic baseline and intervention measures.

Figure 1. Time series design of baseline and intervention phases.

Hours Spent in Time-out



Assessment Procedures

The instrument used to collect the data was a simple chart with the dates of 10 consecutive weeks (see Table 1).

Cognitive-Behavioral Treatment

Table 1

Instrument Used to Collect and Record the Number of Hours Spent in Time-out

Week	Hours Spent Daily in Time-out					Weekly
	Monday	Tuesday	Wednesday	Thursday	Friday	<u>Total</u>
1	.25	1.0	.25	.5	.5	2.5
2	1.5	.5	1.0	0.0	1.5	3.5
3	0.0	.5	1.5	.5	0.	2.5
4	.5	.25	0.0	1.0	.25	2.0
5	0.0	0.0	0.0	0.0	0.0	0.0
6	0.0	0.0	0.0	0.0	0.0	0.0
7	.5	0.0	.25	0.0	.25	1.0
8	0.0	0.0	0.0	0.0	0.0	0.0
9	0.0	0.0	0.0	.25	0.0	.25
10	0.0	0.0	0.0	0.0	0.0	0.0

The total amount of time that the subject spent in time-out for each week was recorded. Data were collected weekly by tallying the teacher's record of the subject's time spent in time-out throughout the baseline and intervention phases. The only data used for this research consisted of the total amount of time that the subject spent in time-out, although other measurable behaviors, such as more classroom time and better compliance to teacher prompts, were also recorded as positive results.

Intervention Procedures

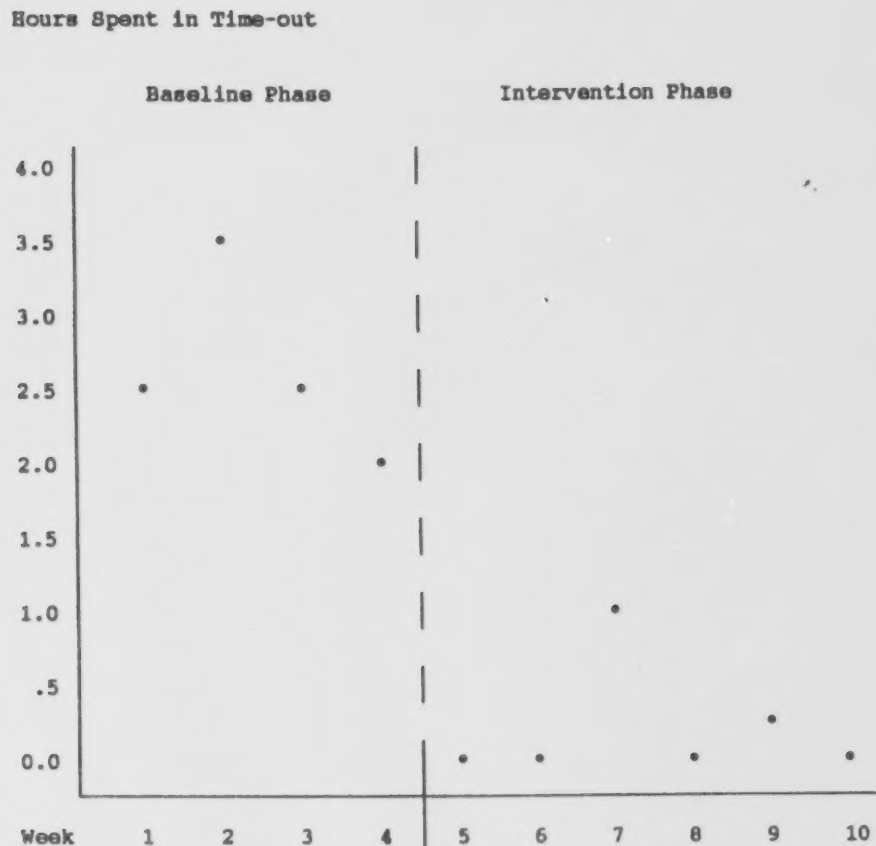
After receiving consent from the subject's parents, the school, and the agency, the author obtained the baseline data and participated in self-control therapy (Horn et al., 1990) with the subject. The training consisted of six weekly 30-minute meetings throughout the intervention period. The subject was taught a problem-solving plan to decrease negative classroom behaviors. The plan included teaching the subject the following steps: taking a deep breath; identifying the problem; identifying solutions; acting on the best solution; and evaluating the chosen solution. An emphasis was placed on taking deep breaths so that the subject could stay relaxed throughout the problem-solving activity. The training was presented by the author for both an academic task (such as completing a math assignment) and for interpersonal problems (such as conflicts with the teacher or peers).

RESULTS AND DISCUSSION

Analysis of the changes in the amount of time that the subject spent in time-out was conducted by visual inspection. Figure 2 shows the amount of time that the subject spent in time-out over a 10-week period.

The baseline data were gathered during weeks 1-4 and showed a range of 2.0-3.5 hours spent in time-out per week. After intervention was initiated in week 5, the amount of time that the participant spent in time-out ranged from 0-1 hour per week through week 10.

Figure 2. Weekly data points of the amount of time the participant spent in time-out through the baseline and intervention phases.



The decline in total time spent in time-out suggests that cognitive-behavioral treatment is an effective means of helping ADHD students in elementary school spend more learning time in the classroom and improved problem-solving activity. In addition to the analyzed data, the subject showed an observable increase in appropriate classroom behavior. His teacher reported an increase in

compliance with instructions, positive play with peers, and improved problem-solving skill activity. Furthermore, the subject was reportedly less disruptive during interactions with the teacher and other students in the classroom.

A potential limitation of the study was the length of time between treatment sessions. Although the weekly measures were assumed to be an accurate measurement of baseline and intervention data, the validity of infrequent measurements may be questioned. Effective evaluation could include more frequent measures of multiple variables in a time series format and might include several subjects to increase validity.

The student had contact with a number of other professionals, such as the school psychologist, teacher, and teaching assistant during the baseline and intervention phases of the evaluation. It is possible, therefore, that the results may have been skewed by the subject's contact with other professionals. These professionals, however, did not have a weekly structured one-on-one meeting time with the student.

The assumption or hope in using self-monitoring and self-control techniques is that participants will continue to use the techniques after therapy is terminated. The research subject's continued use of cognitive training was not addressed in this study. It should also be emphasized that this research subject was taking medication for the ADHD disorder.

CONCLUSION

The author's use of cognitive-behavioral self-control therapy with the subject was effective. Results of this study support previous research

efforts. Specifically, the findings results support by Kendall (1985), Abikoff and Gittelman (1985), and Horn et al. (1990), who structured interventions with ADHD students. In addition, the work of Turkewitz et al. (1975), which showed positive results with BD students who were served in specialized classrooms, is supported.

Time constraints allowed only a weekly 30-minute training session with the subject. A more detailed research study could include more data points in shorter time intervals and run for a time period longer than 10 weeks. In addition, the precise steps used in the cognitive therapy could be correlated more precisely with specific behavioral changes in students in order to pinpoint the most effective aspects of the intervention techniques used in self-control therapy. Even more specifically, researchers could compare the different techniques used in cognitive-behavioral therapy to determine which techniques most effectively address the various and diverse needs of students in special education. Finally, the author asserts that this research is clinically relevant in that it affirms the choice of using cognitive-behavioral therapy, in addition to medication, to increase desired behaviors of ADHD/BD students.

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NATIONAL ASSOCIATION OF VISITING TEACHERS:
THE EARLY YEARS, 1916-1930

James G. McCullagh

ABSTRACT

The creation and development of the first national association for school social workers - the National Association of Visiting Teachers and Home and School Visitors - is traced from its conception to 1930. The Association united visiting teachers, home and school visitors, and school counselors and created a national professional identity that reflected its association with the professions of education and social work. The Association's leadership - all women - established a committee structure, sponsored annual and regional conferences, published a bulletin, newsletters, and various reports, and established qualifications for its membership, which ultimately contributed to the development of one national association for social workers.

The National Association of Social Workers (NASW) united social workers by bringing together five professional membership associations and two study groups, when all seven merged on October 1, 1955, to become one large professional association of social workers (Battle, 1987). One membership association, the National Association of School Social Workers, terminated its activities on September 30, 1955, and became, on the following day, the School Social Work section of the new Association. The first professional association for school social workers - the National Association of Visiting Teachers and Home and School

National Association of Visiting Teachers

Visitors--created in 1919 less than 20 years after the emergence of the first home and school visitors and visiting teachers, was an important step in the development of a national "visiting teacher" identity. This identity - reflecting an association with both education and social work - over time ultimately led to the forging of an exclusive association with the social work profession.

The Visiting Teacher Association strove to unite and professionalize home and school visitors, visiting teachers, and, later, school social workers. Through its leadership, committee structure, annual and regional conferences, and publication of its bulletin, newsletters and various reports, the Association established qualifications for membership and contributed to the development of a social work profession. Although the disparate elements of the social work profession were united in the mid-1950s, school social workers still retained their more particular identities. This commitment to one's identity as a school social worker is reflected in the 1990s, e.g., by the various regional and state school social work associations.

Specialization within the unity of one social work profession is a continuing recognized need in the 1990s. This paper is intended to inform or reacquaint contemporary school social work practitioners with an important component of their roots - their first national association - which may provide a perspective from which to make decisions in the 1990s regarding optimal organizational structures to represent their interests. This article will discuss the creation and early development of the Association through 1930; the later years (1930-1955) will be presented in a subsequent paper.

IJSSW, April 1994

THE VISITING TEACHER MOVEMENT: 1905-1930

The roots of school social work are found in New York City, Boston, Chicago, and Hartford, Connecticut, just after the dawn of the Twentieth Century. By 1916, visiting teachers were found in a number of cities. In New York City the Public Education Association (PEA) assumed responsibility for visiting teachers in 1907 (McCullagh, 1993). In 1916, this organization maintained a staff of 9, who were placed in public schools throughout the city, and, in addition, 7 visiting teachers were employed by the Board of Education (Nudd, 1916). Home and school visiting in Boston, although not formally associated with the public schools, had increased to 15 visitors and 10 volunteers (Culbert, 1916). Philadelphia, by 1916, had 6 visitors, and a number of other cities and towns had at least 1 visitor: Chicago; Baltimore; Columbus, Ohio; Springfield, Worcester, and Newton, Massachusetts; Hartford, Connecticut; Red Bank and Montclair, New Jersey; Mount Vernon and Rochester, New York; Louisville; and, Minneapolis (Culbert, 1916; N.C.V.T., 1924).

By 1921, there were at least 91 visiting teachers in 28 cities in 15 states. New York City led with 17, followed by Boston with 15, Minneapolis with 14 and Rochester with 7 (N.A.V.T.H.S.V., 1923). The growth of visiting teachers was enhanced by the National Committee on Visiting Teachers (NCVT), which placed visiting teachers in approximately 30 communities in the 1920s throughout the United States and provided additional advisory services to other communities who had or were interested in establishing visiting teacher services. By May 1923, the number of visiting teachers had increased to 140, now working in 50 cities and 5 counties in 25 states (N.C.V.T., 1924). By April 1930, there were 258 visiting teachers

National Association of Visiting Teachers

located in 95 cities and 8 counties in 38 states (Nudd, 1930). The dedication and belief of these pioneer visiting teachers was the foundation that triggered the emergence of leadership that in 1916 began an organized process to create a national association.

THE NATIONAL ASSOCIATION OF SCHOOL SOCIAL WORKERS

The striving for a national visiting teacher identity probably began in 1915. Miss Holbrook, one of the earliest visiting teachers, reflecting on the growth of the Visiting Teacher Association, recalled in 1935 a discussion that contained the seeds of a dream to create a national association. While attending the National Conference of Charities and Correction in Baltimore in May 1915, three early visiting teachers - Jane Culbert, Harriet Johnson, and Sara Holbrook - and Sally Lucas Jean, the playground director of the city of Baltimore ("Who Was Who," 1924), had lunch together "and talked of the possibilities in Visiting Teacher work and the need and desirability of keeping in touch" ("President Past," 1935, p. 1).

First National Conference

The idea of "keeping in touch" and sharing professional experiences began formally on July 15, 1916, when visiting teachers held their First National Conference of Visiting Teachers and Home and School Visitors in New York City ("N.A.V.T. Celebrates," 1929; "School Visitors," 1916). This first conference, initiated by the PEA (Cohen, 1964) and attended by "home and school visitors from all parts of the country" ("School Visitors," 1916, p. 24), was held in conjunction with the

annual convention of the National Education Association (NEA). Howard W. Nudd, Director of the PEA since 1913 (P.E.A., 1913), and Harriet M. Johnson, a pioneer visiting teacher with the PEA staff since 1908 (Culbert, 1934) and author of The Visiting Teacher in New York City (1916), were two of the speakers on this eventful day ("School Visitors," 1916). The function of the visiting teacher, aptly summarized by Harriet Johnson (as quoted by Professor D. Johnson), was "[t]o recognize, to study, and to respect the individuality of the child; to this end to establish informal relationships with [children]; and to adapt conditions at home, school, and society to [their] needs" (Johnson, D., 1917).

Ruth True, then with the Children's Bureau, previously a visiting teacher with the PEA and a speaker at the NEA Conference, emphasized the preventive work of the visiting teacher and the necessity that she should be part of the school staff (True, 1916). Henry Thurston, professor at the New York School of Philanthropy, commented on the emerging social work profession and its common characteristics. He cited the visiting teacher and stressed how the social worker was different from the teacher, doctor, nurse, and minister (Thurston, 1916). Thus, this first conference signified that not only was visiting teacher work "more than a local movement" ("N.A.V.T. Celebrates," 1929) but that it also belonged to an emerging social work profession (Thurston, 1916).

In June and July 1917, a group of visiting teachers met for luncheons at the annual conferences of the National Conference of Social Work and the NEA respectively ("N.A.V.T. Celebrates," 1929). At the NEA Convention, Lydia Herrick Hodge, a visiting teacher with the PEA, presented one of four papers on the topic "American Efficiency thru Education." Her paper, "Why a Visiting

National Association of Visiting Teachers

Teacher?," emphasized that the visiting teacher is the "constant advocate of the whole child" (Hodge, 1917, p. 224).

Second National Conference

On June 4 and 5, 1919, in Atlantic City, in conjunction with the National Conference of Social Work (NCSW), the Second National Conference of Visiting Teachers and Home and School Visitors was held and included a round-table discussion and a luncheon conference ("National Scope," 1919; "The Second National," 1919). The role of the visiting teacher in relation to Americanization, community problems, and prevention of retardation and delinquency were the round-table topics, each led by a current or former visiting teacher.

The subject of the luncheon conference, the purpose, and the scope of the work of visiting teachers were addressed by three speakers from diverse professional backgrounds - the President of the Playground and Recreation Association of America, a faculty member of the New York School of Social Work, and a leader from the New York Chapter of the Red Cross ("The Second National," 1919). The visiting teachers at the Conference also discovered through their informal contacts that they "had similar trials and problems," "more points in common than points of difference," and a "oneness of purpose and interest [and also] the necessity of flexibility so that the work may meet the needs of various communities and the changing needs of the same locality" ("The Second National," 1919, p. 8).

Birth of a National Association

At the Second Conference the National Association of Visiting Teachers and Home and School Visitors was formed ("The Second National," 1919). Probably organized by Jane Culbert ("Presidents

IJSSW, April 1994

Past," 1935), a "self-appointed committee of three . . . called together the visiting teachers of the country" ("N.A.V.T. Celebrates," 1929, p. 3) to join with them at the Second National Conference to form a new association. Three visiting teachers - Jane Day, Suzanne Fisher, and Ethel B. Allen - drew up a constitution to establish the National Association. At a business meeting the proposed constitution was approved, officers were elected, and a charter membership of 14 was created ("N.A.V.T. Celebrates," 1929). The founding members included the first three presidents of the Association - Jane F. Culbert, Emma G. Case, and Sara M. Holbrook; Letitia Fyffe and Suzanne Fisher from Chicago (Fisher, 1983); Ethel B. Allen, Emily B. Leonard (Mrs. Brown), Jane Day, Jessie L. Louderback, and Cornelia Swinnerton from New York; Anne L. Gethins, Mount Vernon, New York; Virginia Robinson, a PEA visiting teacher in 1915-1916 and a member of the faculty of the School of Social Work at the University of Pennsylvania from 1918 to 1950 (Quam, 1986; Robinson, 1962, 1978); Elsie F. Packer; and M. L. Whipple.

An important issue addressed at the business meeting was whether to ally the new Association with the NEA or the National Conference of Social Work. The charter members concluded that because "visiting teacher work had its beginnings in the field of education fully as much as in that of social work it was decided to meet alternate years with each" ("N.A.V.T. Celebrates," 1929, p. 3).

Miss Culbert (1921b) succinctly outlined the Association's goals. The Association plans, through interchange of experience and study of methods and common problems, to develop standards of work among its professional members, and through publications and the interest of its associate members, to promote the development of the work and to assist those endeavoring to establish it in new communities. (p. 85)

National Association of Visiting Teachers

The Association shortened its name in May 1923, to the National Association of Visiting Teachers and School Visitors; in June 1924, the name was shortened to the National Association of Visiting Teachers (NAVT); in the summer of 1929, it was revised to the American Association of Visiting Teachers (AAVT); in 1942, it was again revised to the American Association of School Social Workers; and, in 1945, it was changed to the National Association of School Social Workers.

Leadership: Presidents

The first officers of the new Association, elected in 1919, were charter members and among the earliest pioneers who developed this new profession of visiting teachers ("N.A.V.T. Celebrates," 1929). The officers of the Association from 1919 to 1955 - president, vice-president, secretary, treasurer - were all women. They had been or were visiting teachers, home and school visitors, school social workers, or in a supervisory position, while serving in a leadership position with the Association. The presidents from 1919 to 1931 shared common characteristics. All seven were single women who had prior teaching experience and social work practice. Many had attended prestigious women's colleges in the East, received advanced degrees, and obtained their social work education at what is now the University of Chicago and Columbia University. Some had published books and articles; many had held leadership positions; and some had been associated with the demonstration program of the NCVT. These early professional visiting teachers became leaders in their professional association and throughout their lives continued as leaders in their chosen profession. With some exceptions the officers who were elected came from the East, and many served in more than one leadership role. A listing of officers and committee chairs is found in the Appendices.

IJSSW, April 1994

Committee Structure

The earliest extant Constitution of the young Association, adopted May 21, 1923, specifies that there shall be four officers and three standing committees - Membership, Finance, and Publicity - and that the Executive Committee shall consist of the officers and the chairs of the standing committees. By 1930, the standing committees included Membership, Publicity, Standards, Ways and Means, and Amendments (A.A.V.T., 1930a). As the membership grew and expanded to many parts of the country, the Association developed new organizational structures to maintain close relationships with the membership. In 1927, seven districts were organized, each served by a district chair in order to facilitate the work of the Membership Committee ("High Lights," 1928). The Committee's goal in 1927-28 was to focus on "quality - not quantity" (N.A.V.T., 1928, p. 2) in recruiting new members. The Membership Committee also instituted the Executive Committee's decision that applicants for active membership must now submit letters from two active members recommending them for active membership (N.A.V.T., 1928).

In 1928, the Association created 10 regional committees ("Regional Committees," 1928). The function of these committees was to advance the goals of the Association and included working to raise professional standards, "to report new candidates for membership, and to arrange regional conferences and participation in conferences by other local groups where this seems desirable" (p. 3). Soon thereafter various regions instituted regional and state conferences ("Regional Committee Notes," 1930).

National Conferences: 1920-1930

The annual national conferences, beginning in 1916, alternated with the NEA and the National

National Association of Visiting Teachers

Conference of Social Work, thus continuing the Association's dual commitment to the professions of social work and education.

1920. The first national meeting of the Association or the Third National Conference, held in New York City in May, addressed the "organization and administration of visiting teacher work and the relation of mental hygiene to visiting teacher's problems" (Oppenheimer, 1925, p. 12).

1921. The Fourth National Conference, held in Milwaukee in June and in connection with the NCSW, included papers presented by Miss Culbert (1921a) and Hegel (1921); a conference led by Dr. Jessie Taft on "Individualizing the Child in the Public Schools;" and a round-table discussion led by Miss Emma Case on the "Relation of the Visiting Teacher to the Social Worker, . . . Adopting the Curriculum to the Needs of the Unadjusted Child [and] The Next Steps in Visiting Teacher Work" ("Visiting Teacher Notes," 1921, p. 8).

1922. The Association, meeting in Boston in connection with the NEA, discussed "the diagnosis and treatment of behavior problems among school children [and] . . . the program of the Commonwealth Fund for the promotion of visiting teacher work" (Oppenheimer, 1925, p. 13).

1923. The Association met in Washington, D.C., in conjunction with the NCSW. An important address at the Association's conference by Dr. Bernard Glueck and subsequently published (Glueck, 1924) was so well received that the Commonwealth Fund Program reprinted almost 5000 copies for distribution to those on its mailing list ("Some Extra-Curricular," 1924). Glueck (1924), concerned that training schools for teachers were more concerned with educational method rather than "the personality of the teacher and [her] vision" (p. 148), commented that the visiting teacher is an ideal model for injecting

into the class-room some of the spirit and

some of the vision of modern social service at its best. The growth of the visiting teacher movement amply indicates how receptive educators really are to those enterprises which assist them in gaining a more comprehensive knowledge of the child and an acquaintance with means, other than strictly academic ones, for the achievement of a better adjustment of the child to his school requirements. (p. 149)

Howard Nudd (1923), Anna Pratt (1923), and Emma Case (1923) presented papers at the NCSW under the topic "Social Case Work as Applied to the Schools." At a luncheon that drew 72 people, "short reports were given from some twenty cities in which visiting teachers are working" ("National Association," 1923).

1924. In July, the Association again met in Washington, D.C., but this time with the NEA. The central staff and visiting teachers of the National Committee on Visiting Teachers were well-represented, presented papers, and presided at meetings ("N.A.V.T. Meeting," 1924).

1925. The Association, meeting in Denver in June, in conjunction with the NCSW, held its first conference in the West and thus afforded many visiting teachers an opportunity to attend their first annual conference (Everett, 1925a). Helen Gregory (1925) expressed a continuing service delivery theme for visiting teachers and an important reason for attending annual conferences:

As visiting teacher work grows older, we require a more and more definite and refined technique, akin to that used by other social workers, with differing approach. To keep up to date with our thinking and doing, to acquire the freshness and vigor of new ideas, and new ways of carrying out our ideas, to gain insight into our problems, we must get away from these problems and look back though the glasses provided for us by such gatherings as the coming National Conference of Social Work in Denver. (p.6)

National Association of Visiting Teachers

Two presentations at the conference for visiting teachers and published in the subsequent issue of the Bulletin specifically addressed the issue of visiting teacher standards (Brown, 1925) and training (Everett, 1925b).

1926. Miss Everett (1926), anticipating the annual summer meeting to be held in Philadelphia with the NEA, stated in a message to Association members that one of the "chief tasks" at this conference was "to state clearly what is, and what is not, a visiting teacher. . . . The distinction must lie, not in what she is called, but in what she does" (p. 2). One visiting teacher observed, at the conclusion of the conference, that over "the next few years more and more consideration will be given to defining limits, drawing boundaries, developing technique, setting up standards" ("Report," 1926). The Association President, Rhea Kay Boardman, reflecting on the results of the conference with the NEA, expressed unbounded enthusiasm on "the professional strides the Association has made" (Boardman, 1926, p. 1). Visiting teachers, as noted by educational leaders at the conference, "are considered one of the vital forces in the educational world today" (p. 1). She observed that "visiting teachers combine the vigor and enthusiasm of the pioneer with the technique and equipment of the trained worker" (p. 1). She cautioned the membership, however, that even though visiting teachers and the Association have received national recognition, veteran visitors must become involved at the state and local level and "become identified with the state social welfare conferences, our state teachers' meetings and county institutes so that these local groups, too, may become aware of our existence, and may realize our desire to cooperate and contribute" (p. 1). Miss Boardman's report on qualifications for beginning visiting teachers would lead to the establishment of specific educational and professional experience requirements (see below).

IJSSW, April 1994

1927. At the conference held in Des Moines, in conjunction with the NCSW, an afternoon was devoted to standards and qualifications of the visiting teacher. The first topic, "Under What Plan of Organization Does Visiting Teacher Work Best Maintain Its Standards?," was presented by Miss Culbert, who "outlined a detailed plan for the organization of visiting teacher work" ("National Association," 1927, pp. 3-4). The second topic, "What Preparation Should the Superintendent Expect of His Visiting Teacher?," led by Miss Holbrook, emphasized the necessary qualifications for visiting teacher work ("National Association," 1927, pp. 3-4). At a luncheon meeting, attended by over 100 people, and "voted a decided success," a number of visiting teachers gave short talks on the topic, the "Visiting Teacher at Work" ("Des Moines Program," 1927, p. 3). Howard Nudd (1927) and Janet Baskett (1927), a NCVT visiting teacher from Columbia, Missouri, also made presentations at the NCSW.

1928. At the 10th annual conference held with the NEA in Minneapolis, Association meetings focused on the theme that teacher training programs and schools are responsible for developing a social attitude toward the child (Everett, 1928; "Program of Minneapolis," 1928). Among the important decisions made at the business meetings, members approved a motion "that a committee be appointed to analyze the functions of a visiting teacher" ("High Lights," 1928, p. 4). The name "visiting teacher" also was questioned at the 1928 annual meeting ("High Lights," 1928), but the Executive Committee, rather than appoint an authorized committee to consider a name that more nearly defined the function of the visiting teacher, reported, in 1930, its decision that "it seemed most improbable that a more adequate term could be evolved at this time, [thus] it was voted that the matter be dropped" (A.A.V.T., 1930b, p.6).

National Association of Visiting Teachers

1929. At the annual meeting held in San Francisco in conjunction with the NCSW, Association members primarily addressed the relationship of the school and social work. Other meetings focused on problems from the field, reports from committees, and the research value of records and reports ("Program of the San Francisco," 1929). As in past years, Association members participated in joint meetings with the NCSW. Among the important decisions made at the business meeting, the membership voted to change the Association's name to the American Association of Visiting Teachers, to elect officers every 2 years instead of each year, and to approve new membership requirements ("Conference High Points," 1929).

1930. At the annual meeting, held in Columbus, Ohio, in conjunction with the NEA, the members could proudly state that there were now almost 200 active members and that it had "developed professional standards" ("High Lights, 1930, p. 3). Of critical importance to the members was the question of standards - standards with respect to visiting teachers' training, the size of their case load, the scope of their work ("High Lights," 1930), and generally whether there should be uniform standards for visiting teachers ("Annual Meeting," 1930).

The Bulletin

In December 1924, the Association issued its first Bulletin. Due to the realization that the membership was "widely scattered" and that the annual conferences did not bring together many of the growing membership, the Bulletin was intended to serve multiple purposes (Everett, 1924):

It is for the purposes . . . (1) of closer affiliation among our members, (2) of spreading and exchanging information regarding our work, and (3) of making the association serve as far as possible as a standard setter in

such matters as qualification, definition of function, salary, position in the school administrative system, extent of school territory or population covered, . . . that we plan to have published during the year three or four bulletins, to be issued from localities in which visiting teachers are so organized that a simple form of publication is possible. (p. 1)

The first Bulletin was issued by the NCVT and was the work of Miss Ethel Allen, who was assisted by other members of the central staff. It contained a "descriptive directory of visiting teacher centers" (Everett, 1924, p. 1) and thus served as "an introduction of the members to one another" ("The Present Situation," 1924, p. 3). The NCVT also issued the Directory Number in April 1926, which included a complete list of all visiting teachers and allied workers by city, state, and auspices.

Subsequent early issues represented the work of visiting teacher staff of various cities, the Association's Publicity committee, or selected visiting teachers, who were responsible for all or part of an issue. In 1929, the first editor, Josephine Sherzer, was appointed. Early issues of the Bulletin, prepared by visiting teacher staff in those cities that pioneered the movement - the White-Williams Foundation in Philadelphia; the staff of the visiting teacher department in Rochester, New York; visiting teachers of the Minneapolis Public Schools; Association of Visiting Teachers of the Board of Education, New York City; and, Boston home and school visitors - provide a wealth of information, including historical background, analysis of children and families served, number of workers, and their assignments and case examples.

The Bulletin served as the visiting teachers' primary vehicle of communication. Aside from annual conferences and regional and state conferences,

National Association of Visiting Teachers

early visiting teachers were dependent on the Bulletin. It served as a newsletter, a primary source for articles, and summaries of papers and presentations of various meetings, including the Association's annual conferences. A complete listing of articles and other writings of the Bulletin appear in the Iowa Journal of School Social Work (McCullagh, 1986, 1987, 1988).

Visiting Teacher Qualifications

The National Association of Visiting Teachers and Home and School Visitors (1923) initiated its first research project shortly after the Association was created in June 1919, to survey various aspects of the work of the visiting teacher ("National Survey," 1919). This study, under the leadership of Jessie L. Louderback, Chair of both the Publicity and Survey Committees and a visiting teacher since 1914 with the New York City Board of Education, also eventuated in a master's thesis in 1922 for Miss Louderback, who was awarded a Master of Arts in Educational Psychology from Teachers College, Columbia University (Louderback, 1922). The report was based upon questionnaire responses from 60 of the 80 then-known visiting teachers in the United States and covered such topics as their training and preparation to be visiting teachers, methods of work, assignment to schools, supervision, administrative relationships, and reasons for referral. The goals of the report were to provide information to those initiating the work in new communities and information to visiting teachers so that they might understand the work of other visiting teachers (N.A.V.T.H.S.V., 1923).

The Association was particularly interested in the educational and professional experiences that the respondent visiting teachers found most helpful to their work and their recommendations for preparing future visiting teachers. Of the 58

respondents, 22 stated that they had received a bachelor's degree, 1 had a master's degree, and 17 stated that they had "training for teaching in normals, kindergarten training schools, etc." (Louderback, 1922, p. 39). About one-third (19) also had completed various courses (psychology, sociology, vocational guidance, economics, among others) beyond the bachelor's degree or toward an advanced degree (Louderback, 1922). Twenty-nine visiting teachers stated that they had received "special training at schools of social work" (Louderback, 1922, pp. 39-40). Relevant experiences included prior teaching experience in elementary schools or high schools (32); 3 had previously been principals and 1 had been a superintendent. Over three-fourths (45) had previously practiced some type of social work in a wide variety of settings and agencies (settlements, juvenile courts, traveler's aid, and child labor) (Louderback, 1922). In response to the question on a suggested "course of preparation for future visiting teachers," Miss Louderback summarized the visiting teachers' responses:

1. A good educational foundation at either a college or normal school.
2. Special study of psychology, psychiatry, and child study in its various phases. Other courses as needed such as language and vocational guidance.
3. Training for social work including special study of sociology, case work - cooperating with social agencies, industrial conditions, racial characteristics.
4. Experience in (a) teaching - a sufficient number of years to understand the school's problem; in (b) social work - varied experience if possible in order to cope with the various phases of the work. (pp. 42--43)

National Association of Visiting Teachers

Miss Louderback (1922) noted "that about one-half the present visiting teachers had substantially the training outlined above" (p. 43).

An important Association goal was to promote standards for visiting teachers. Qualifications for Association membership was one approach to setting standards for the visiting teacher. The proposed standards set forth in the National Association's (1923) first report began a process that culminated in formal qualifications for active membership by 1929. The relevant chapter title was instructive: "What Qualifications are Essential for Visiting Teachers" (p. 52).

Oppenheimer (1925) also addressed the "Qualifications and Training of Visiting Teachers" (p. 142) and, after analyzing responses from various "leaders in the movement" (p. 145), proposed minimum and desirable qualifications for visiting teachers. The desirable qualifications are

- (1) graduation from a school of education, four year course;
- (2) teaching experience, preferably in the elementary school, for two years;
- (3) training in a school of social work, one year, which training must include experience in social case work of a varied nature. (pp. 147-48)

To meet current demands for visiting teachers, Oppenheimer (1925) proposed that a high school graduate who completed a "two-year teacher training course in an approved training institution" (*p. 162) instead of the 4-year course and met the other desirable qualifications would meet minimum qualifications for appointment as a visiting teacher.

In 1926, at the Association's meeting in Philadelphia, Miss Boardman presented the Committee on Standards' report on visiting teacher qualifications for new entrants to the field. The research report was based on responses from 141

IJSSW, April 1994

out of 175 questionnaires sent to visiting teachers ("Report of the Philadelphia," 1926). At the conclusion of her presentation a motion was made and approved "that a committee should be appointed by the chair to continue the study of standards through the coming year" (p. 15). At the business meeting at the next annual conference (N.A.V.T., 1927), the Committee on Standards, under the leadership of Shirley Leonard and guided by the responses to the earlier study by Miss Boardman, proposed specific qualifications for active membership, while also including points to be discussed for each proposed standard.

From 1929 through at least 1937, multidimensional qualifications were now required for active membership. The basic prerequisite was that applicants must be actively engaged as visiting teachers and then meet the following requirements to be considered for active membership ("High Lights," 1928):

the degree of bachelor of arts or a certificate from a standard teachers' college or its equivalent; a course of training which includes the theory and practice of case work in a recognized school of social work of not less than one academic year's duration, or two years of well-supervised training in a recognized social case work agency; at least one year of experience in teaching and at least one year of professional work either with a recognized social case work agency - family or psychiatric preferred - or one year as a visiting teacher. (Culbert, 1930, p. 467; 1933, p. 536; "High Lights," 1928; Leonard, 1935, p. 535; Janvier, 1937)

A college education was a minimum prerequisite, but the required social work education could be substituted, and the minimum professional experience included at least 1 year of both teaching and social work practice. Some of these requirements

National Association of Visiting Teachers

apparently were not intended to be rigid if an applicant were otherwise well qualified. For example, the NAVT Executive Committee (1929), meeting on June 28, 1929, determined that the lack of teaching experience would not bar membership if the applicant's "prior training and experience in schools could not be questioned" (p. 1). Yet, the Executive Committee was not willing to remove the requirement of prior teaching experience. Rather, they preferred that the Membership Committee make the first determination and then refer to the Executive Committee for final approval.

The formal multidimensional requirements for active membership in the Association was a marked departure from the earlier and simpler requirement that "active members shall be those engaged in the work of the Visiting Teacher or in allied work approved by the Membership Committee" (N.A.V.T., 1925). The common qualification for acceptance as a member in the Association was simply the status of a visiting teacher. The qualifications of the first visiting teachers, as reported in the National Association's first report (1923), were consistent with the qualifications that would in 1929 be requisites for active membership. Just under 70% of the respondents to the 1921 study had obtained at least some college education or training in normal schools, and 50% had received some training at a school for social work. Slightly over half had prior teaching experience, and 78% had prior social work experience.

The new requirements for active membership formalized the necessity of a college education or its equivalent and began the process of requiring social work education, although, at this time, 2 years of social work practice would substitute for this requirement. The Association was in the process of raising qualifications for membership at about the same time as were the then American Association of Hospital Social Workers (Stites, 1954) and the American Association of Social Workers

IJSSW, April 1994

(Leighninger, 1987). Visiting teachers and their Association had now moved beyond the pioneering stage. Standards for new entrants had crystallized, and guidance could be provided to school districts and universities who planned to offer training programs for visiting teachers.

CONCLUSION

The visiting teacher movement, begun on the East coast, had spread by 1930 to many parts of the United States. Early on, the pioneer visiting teachers sensed the need for establishing their own professional association. The formal process began in 1916, and in 1919 the National Association was born with 14 charter members who came together in Atlantic City at the meeting of the National Conference of Social Work. Association members decided that their professional identity should continue with the professions of education and social work. Accordingly, the Association alternated its annual meetings with the NEA and the NCSW throughout the decade of the 1920s but maintained a presence at both meetings each year.

Annual conferences were held throughout much of the United States, thus allowing visiting teachers to attend at least some of the annual conferences. Members were encouraged to attend both the NEA and NCSW annual conferences each year. Regional and state conferences also served to bring members together.

The Association established multidimensional qualifications for visiting teacher membership in the late 1920s. Requirements for active membership continued to reflect the visiting teacher's historic commitment to social work and education and formalized qualifications that many of the

National Association of Visiting Teachers

early members already shared but which now served to raise standards and to advise school boards and universities about those qualifications that were essential for the visiting teacher status. Thus, an Association goal was to be a pacesetter in establishing high qualifications for all visiting teachers. Expansion of the movement to new localities, recruitment of prospective visitors, continuing education at local and regional conferences, and publicity about the work of the visiting teacher were other important themes throughout the decade.

The Association published its first Bulletin in 1924 and would continue publishing the Bulletin until September 1955. The Bulletin, which served multiple purposes, helped to unite visiting teachers. The Association's committee structure reflected its areas of focus and concern - membership, publicity, finances, and the development of regional committees to better serve and inform the membership.

The increase in visiting teachers from 91 in 1921 to 258 in 1930 mirrored the growth of the Association's membership. The NCVT was also instrumental in the growth of the visiting teacher movement in the 1920s. The central staff, as well as a number of the Committee's visiting teachers, were not only participants but also leaders in the Association. By 1930, the work of the National Committee would soon end. The American Association of Visiting Teachers (1930b) passed a resolution expressing their appreciation of the work of the National Committee but also their profound disappointment: "It is the opinion of the Executive Committee that the whole field of visiting teacher work will suffer professionally if the National Committee on Visiting Teachers is unable to continue its work" (p. 5). The loss of the National Committee came at a time when the Nation was suffering the effects of its worst economic

IJSSW, April 1994

depression. Visiting teachers and their Association would survive the 1930s and grow stronger, but in 1930, the promise of the growth of a strong national visiting teacher movement appeared less hopeful.

The Association, by 1930, had established multi-dimensional professional qualifications for its members that reflected its commitment to college and professional education and professional practice in teaching and social work. Visiting teachers now had their professional Bulletin, opportunities for continued professional development through annual conferences with the NEA and the NCSW as well as local, state, and regional conferences, and in the 1920s, the national recognition provided by the Commonwealth Fund's support of the National Committee on Visiting Teachers. Visiting teachers and the leaders of the now American Association of Visiting Teachers were too well entrenched to suffer long-term loss, even with the withdrawal of the Fund's support for the National Committee.

The American Association had in place the essential ingredients for the further professional development of visiting teachers. Qualifications for membership included professional education and experience, a professional Bulletin, annual conferences, research studies, and a cadre of leadership. Leaders were or had been practitioners who believed in the essential purpose of the visiting teacher to unite children and their homes with the school and its community. The common goal was that children would realize their potential in a land of opportunity.

The Association, from 1931 to 1955, continued to grapple with the appropriate educational and professional requirements for visiting teachers (later school social workers). It struggled also with the appropriate organizational structure for its further growth and development, which, for a

National Association of Visiting Teachers

time, was resolved by the creation of one united professional association in 1955. These questions still are ongoing, important, and essential if school social workers are to achieve their basic mission. The vision of the pioneer visiting teachers and the leaders of the Association is a reminder to school social workers that their professional legacy requires a constant renewal and commitment. School social workers are challenged constantly to acquire professional education and intervention knowledge to ensure that all children are guaranteed their right to be full participants in the American educational enterprise and to realize their dreams.

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Appendix A

Leadership of the National Association of School Social Workers

PRESIDENT	VICE-PRESIDENT	SECRETARY	TREASURER
Jane F. Culbert, 1919-21 New York City	Sara M. Holbrook, 1919-22 Burlington, VT	Emma G. Case, 1919-22 Rochester, NY	Emma G. Case, 1919-22 Rochester, NY
Emma G. Case, 1921-22 Rochester, NY	Edith M. Briggs, 1922-23 Rochester, NY	Harriet E. Totman, 1922-24 Cleveland, OH	Harriet Totman, 1922-24 Cleveland, OH
Sara M. Holbrook, 1922-24 Burlington, VT	Edith M. Dixon, 1924-25 Worcester, MA	Julia Drew, 1924-25 Minneapolis, MN	Sara M. Laughlin, 1924-26 Philadelphia, PA
Edith Everett, 1924-26 Philadelphia, PA	Rhea Kay Boardman, 1925-26 Red Bank, NJ	Alice M. Leahy, 1925-25 Acting, Minneapolis, MN	
		Dorothy A. Ihlsent, 1925-27 Toledo, OH	
Rhea Kay Boardman Red Bank, NJ, 1926-27 New York City, 1927-28	Shirley Leonard, 1926-28 Rochester, NY	Lois A. Meredith, 1927-29 New York City	Edith Briggs, 1926-28 Rochester, NY
Helen R. Smith, 1928-29 New York City	Frances L. Range, 1928-29 Detroit, MI	M. Emilie Rannells, 1929-31 Philadelphia, PA	Ruby B. Carlton, 1928-30 Newark, NJ
Julia K. Drew, 1929-31 Minneapolis, MN	Gladys L. Keyes, 1929-30 San Diego, CA		

Sources: NASSW Bulletin, 1924-55; NASSW Minutes of various committees, on file with the Social Welfare History Archives.

Appendix B
Leadership of the National Association of School Social Workers

PROGRAM	MEMBERSHIP	STANDARDS	NOMINATIONS
Elizabeth McMechen, 1924-25 Berkeley, CA	Emily L. Brown, 1924-25 New York City		
Anna B. Pratt, 1925-26 Philadelphia, PA	Ethel B. Allen, 1925-26 New York City	Rhea Kay Boardman, 1925-26 Red Bank, NJ	
Helen Gregory, 1926-27 New York City	Julia Dew, 1926-28 Minneapolis, MN	Shirley Leonard, 1926-27 Rochester, NY	
Gladys Keyes, 1927-28 San Diego, CA		Gladys Hall, 1927-28 Portland, OR	
Frances Piekarski, 1928-29 San Diego, CA	Helen A. Smith, 1928-29 Miami, FL	Della Ryan, 1928-31 Huron County, OH	Marion R. Meyers, 1928-29 Rochester, NY
Ethel Reynolds, 1929-30 Cincinnati, OH	Alma Leabe Sioux Falls, SD, 1929-30 Cincinnati, 1930-32		Marie McDonald, 1929-30 Minneapolis, MN
PUBLICITY	FINANCE	REGIONAL	AMENDMENTS
Jessie L. Louderback, 1919-? New York City	Emma G. Case, 1925-26 Rochester, NY		Shirley Leonard, 1927-28 Rochester, NY
Grace D. Chase, 1924-28 Bluefield, WV	Edith Everett, 1926-30 Philadelphia, PA	Helen R. Smith, 1929-30 New York City	
Josephine Sherzer, 1928-30 New York City			

Sources: NASW Bulletin, 1924-55; NASW Minutes of various committees, on file with the Social Welfare History Archives. Information for 1919-1923 was unavailable.
*Finance Committee was changed to Finance and Amendment Committee in 1928 and to Ways and Means Committee in 1929.

CAL-PAL UPDATE

John Wilson

Editor's Note: Cal-Pal is an innovative endeavor to serve the critical needs of youth in Iowa. This is a service delivery update based on the article "Cal-Pal: A County-Wide Volunteer Service Program" from the IJSSW, Vol. 6, No. 1 and 2.

The Cal-Pal (Wilson, Adams & Carlson, 1993) community service program began in Calhoun County, Iowa, in 1990. School social work services were used to help organize this volunteer program and to facilitate the early growth of the county-wide service to children from single parent families. This update of the Cal-Pal program briefly reviews the early structure and services provided in the beginning of the service organization, the hopes for the program, the current status, and the hopes for the future of the program.

Calhoun County, situated in Northwest Iowa, is sparsely populated, has lower than average per capita income, a high number of single parent families, and few family counseling services (a mental health center counselor provides services in the county 1 day a week). One school social worker serves six of the elementary school buildings in the county. In the fall of 1989 the school social worker, a school nurse, and school counselor from Calhoun County initiated an exploration of needs for a match-up service program between youth and responsible adults by enlisting the participation of school support service personnel throughout the entire county. The need for a service program was felt to be strong and self evident, and an expanded planning committee was developed by inviting interested leaders from the community at large to participate.

IJSSW, April 1994

The collaboration between school representatives and community leaders in the planning stage of Cal-Pal produced a program model that has some distinct features from most match-up service programs:

1. Instead of being sanctioned by an institution such as the YMCA or by a national organization, Cal-Pal was set up as an independently-run program based on voluntary participation.

2. Instead of one coordinator overseeing the service program, the planning committee decided to have a volunteer coordinator to represent each of the communities in the county. There were potentially seven such communities in 1989.

3. Since there was both community and school participation in planning, recruitment of youth and adult volunteers was understood by the planning committee as a combined responsibility, instead of the responsibility of an individual coordinator.

4. The program made a grant application to the Iowa Department of Public Health, Division of Substance Abuse, as a preventative service program. Cal-Pal coordinators initially received \$1,500, which was overseen by a volunteer executive board made up of representatives from participating communities. The Cal-Pal program officially began in Calhoun County in April 1990.

During the 1st year of the Cal-Pal program, effort was given to filling board positions and coordinator vacancies, continuing the financing for the program, and structuring successful match-ups. Participation in the Cal-Pal program at the end of this 1st year included regular monthly board meetings by 7 executive board members, 10 coordinators and co-coordinators, and 2 advisory board members. There were a total of 25 match-ups completed by the end of the 1st year, and 16 were actively continuing.

HOPES AND LIMITATIONS

It was a planning goal that all communities in the county would actively participate in the volunteer program. In reality, one community has been hesitant to join due to feelings of allegiance to another county and uncertainty about joining an independently run service program. Another community does not yet have active school support and is sporadic in referring youth volunteers. Still another community is quite small in population size, and referrals are largely determined by families moving into the area.

It was hoped at first that match-ups would steadily increase until there were 40-50 active match-ups. The reality in Calhoun County is as follows:

1. Many volunteer match-ups do not necessarily exist for 4 to 5 years but may exist for only a year. Many times those youth want to be with other adults, which takes away from potential increase in numbers.

2. There are a limited number of adults in each community who are willing to volunteer.

3. Constant communication is needed to let families and youth know that the program exists. New school administration, new school counselors, and new people moving into the community complicate the organization. There is additional time needed to make people aware of and facilitate trust regarding the integrity of Cal-Pal.

4. Many youth and their families move out of the area.

5. As adult pals adapt to changes in their lives (new family members, career changes, sickness, family crisis), these adult pals sometimes retire from active involvement with Cal-Pal.

CURRENT STATUS OF CAL-PAL

Cal-Pal continues to be a vital program in Calhoun County, providing a model that can be used in other school districts and counties. Some evidence of the vitality of Cal-Pal includes the following growth:

1. There have been about 55 official match-ups between youth and adults since the beginning of this individual service program. Some youth have had more than 1 adult pal. A few youth, as they have reached adolescence, have discontinued the formal program. In January 1994 there were 25 active youth/adult Cal-Pal match-ups.

2. There has been stability of commitment among Calhoun County community board members who work as volunteer executive board, coordinator, or advisory members; of the 22 committee members who have volunteered to take leadership responsibilities, 18 people are still serving in some capacity. Some of those on the board also are adult Cal-Pals.

The program has expanded its scope in the last 3 1/2 years to promote among its participants a greater sense of belonging and pride as a Cal-Pal. In the winter Cal-Pal sponsors an annual recognition dinner for adults; in early spring there is a fun night for youth and adults at a recreation site in Calhoun County; and in the summer there is an annual outing for Cal-Pal youth and their adult pals (summer, 1993, e.g., was a bus trip to Henry Doorley Zoo in Omaha, Nebraska).

FUTURE HOPES

One of the challenges ahead is to develop training procedures and workshops for prospective

and current adult Cal-Pals. Several adult Cal-Pals have already indicated a desire for training aimed at developing better individual relationships with their Cal-Pal youth. As Cal-Pal continues to operate as a rural alternative service to more expensive national programs, it is hoped that other school social workers will find aspects of Cal-Pal worth developing in counties that do not have an adult/youth pal program.

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BOOK REVIEW

WAR AGAINST THE SCHOOLS: ACADEMIC CHILD ABUSE.
By Siegfried Engelmann, Halcyon House, a division of Educational Research Associates, 1992.

Engelmann asserts that U.S. schools are "sorting machines" that produce high rates of failure. The system is "sick," but failure is blamed on the students or demographic factors rather than on poor teaching. Engelmann believes that our students perform poorly because schools are directed by administrators who lack technical expertise and are incompetent in the instructional area. Educators "love theories" that are popular in their day but are naive about instructional design and unconcerned with what works.

Engelmann's critique of modern day education reaches far and wide. He is critical of Head Start ("a front for public health"), school reform, whole language, developmental theory, learning styles, site-based management, teacher training programs, and more. He defines "academic child abuse" as "the use of practices that cause unnecessary failure of foundation skills." Engelmann is an advocate of carefully designed direct instruction. He has authored and been involved in the field testing and promotion of the DISTAR reading, language, and arithmetic programs. He presents evidence that when highly structured instructional approaches are evaluated in the classroom, they have performed better than more experimental approaches. Engelmann asserts that whole language and manipulative math approaches, while appealing to educators, were never field tested prior to marketing and are contributing to the lack of proficiency of American students.

Engelmann believes that "if the kid hasn't learned, the teacher hasn't taught." He believes teacher training programs "merchandise general principles" rather than instructional approaches and effective curricula that work well. Engelmann is advocating systemic change: installing a data-based curriculum, training teachers, providing support, and devising a quality control system that rewards results. Engelmann's theses will not sit well with many educators. He is to be commended, however, for raising the issue of "blaming the victim" (children) rather than holding the system accountable for school failure.

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April 1995
Volume 8, Number 1

IOWA JOURNAL OF SCHOOL SOCIAL WORK

EDITORIAL COMMENTS

Gary Froyen 3

ARTICLES

Stress Debriefings For School Professionals
Involved In Traumatic Event Response
Steve Heer 5

The Intervention Model of School Social Work
As Used by Green Valley Area Education Agency 14
Danette Harrington, Sally Madsen, Kaye Hanna,
Lora Hight, Ray Franklin, Sandra Sickels 22

The Formation of the School Social Work
Association of America
Charlene Struckman 29

BOOK AND GAME REVIEWS

School-Based Assessments and
Interventions For ADD Students
Kate McElligatt 37

Stop, Relax, and Think
Lora Hight 39

Time Out:
Abuses and Effective Uses
Sandra Sickels 40

EDITORIAL COMMENTS

As Cheryl and I (mostly Cheryl) complete this Spring edition of the Iowa Journal of School Social Work, I would like to relate to our readers some of the most recent accomplishments and recognitions that the Journal has received.

In an attempt to "spread the word," and with Board approval, our last Journal issue in April, 1994, was distributed to accredited university schools of social work across the nation. An additional mailing of approximately 500 copies of the Iowa Journal of School Social Work was distributed, which resulted in subscription increases from universities and libraries. To me, it is exciting to think that our Journal is being read and recognized across the country.

Special recognition needs to be given to John Wilson, Helen Adams, and Donna Carlson whose article, "Cal-Pal: A County-Wide Volunteer Service Program" (May 1993 issue), has been accepted for publication in Resources in Education (RIE), which is part of the ERIC Clearinghouse on Counseling and Student Services. As you may know, ERIC is a clearinghouse system for university libraries and provides journal abstract information.

Continuing in our efforts to increase the visibility of the Journal, copies have been and will continue to be distributed to the National Association of Social Workers headquarters for Social Work Research and Abstracts, which is a quarterly periodical published by NASW. Authors of articles for the Iowa Journal of School Social Work may wish to consider submitting an abstract (one paragraph of approximately 150 words), which will give a reader enough information about the article to make a decision about whether to read the original article. The topic sentence needs to summarize the central thesis, with subsequent sentences amplifying the topic sentence. Though there is no guarantee that an author's article will be published in the NASW periodical, this is a great opportunity for authors to receive additional recognition for their efforts.

Cheryl and I would like to thank all of the authors who submit to the Iowa Journal of School Social Work for publication. We are hopeful that, with your understanding that the Journal is receiving some national recognition, those of you who have written before or those who are considering submitting an article will do so in the near future. Let's remember that the Iowa Journal of School Social Work is

one of three publications of its type in the entire nation, and, from start to finish, this Journal is produced almost exclusively through voluntary effort. Your continued support is vital to maintaining the professionalism, recognition, and dissemination of information that we have all worked hard to achieve.

Gary Froyen
Managing Editor

STRESS DEBRIEFINGS FOR SCHOOL PROFESSIONALS INVOLVED IN TRAUMATIC EVENT RESPONSE

Steve Heer

ABSTRACT

Traumatic event response plans have been adopted by many schools for the purpose of meeting the needs of students after a suicide or other sudden death of a peer. They have also been useful following assaults, natural disasters, or other events that provoke significant stress responses in the school setting. What we have known all along, but only recently begun to address, is the stress response in team members themselves who offer this "psychological first aid" to students, parents, and colleagues. Stress debriefings have been offered to emergency service providers in the medical, law enforcement, and firefighting fields for several years by critical incident stress debriefings teams that are comprised of mental health professionals and trained peer debriefers. Those who offer analogous "psychological emergency" services in the schools could benefit from debriefings as well. This article describes debriefings and makes a case for their provision to the adults in the school setting.

Crisis response has become an essential service of educational systems. Individual members of school teams, by virtue of their job descriptions, professional training, and/or personal interest, have always been in the role of providing crisis response services to students. In the past several years, however, many school systems have adopted plans that choreograph a system-wide response by an identified team of administrators, teachers, and other support staff. This may include community members not normally involved in the school - health and mental health professionals, clergy, and community agency staff who have connections to the school and who are called upon to provide assistance for these incidents. These plans have been adopted in recognition that during times of crises, there are a number of normal behavioral, emotional, somatic, and cognitive reactions by the impacted population that cannot be ignored or just left to "work itself out." The Traumatic Event Response Plan (TERP), developed in 1987 by Keystone AEA 1 in northeast Iowa, is an example of such a plan. A

synthesis of other plans and Keystone staff's own experiences, being revised on an ongoing basis (most recently the fall of 1993), TERP addresses many of the tasks that a school team needs to perform to assure the healthy interpretation of and adjustment to a traumatic event by students. To leave to chance, or worse, to ignore the disequilibrium that many students experience following stressful events contains the risk of hopelessness, damaged relationships, "copy-cat" suicides, behavior problems, and an array of other personal and interpersonal post-event difficulties.

One limitation of the Keystone AEA's (1993) Traumatic Event Response Plan is its primary concern with the needs of the student population. One paragraph in the plan, "Sensitivity to Staff Members" (p.4), acknowledges that some adults' relationships with a student prior to a suicide may justify "special support." The 1993 revision also recommends that the response team should be debriefed following the implementation of the plan, due to the stressful nature of serving on the team as a responder after such an event (p. 12). While stating this justification for a debriefing and giving a brief explanation of its characteristics and goals, insufficient information is provided to actually conduct a debriefing. The purpose of this article is to provide more information on stress debriefings for school system teams and to serve as a guide for the reader with a background in counseling to begin doing debriefings of school personnel after these people have been involved in crisis response efforts.

POST TRAUMATIC STRESS

Post-traumatic stress is a normal response to trauma. Symptoms may be behavioral, emotional, cognitive, physical, and/or interpersonal. They include the following:

- recurrent memories or "flashbacks" of the incident;
- sleep disturbances;
- sadness and depression;
- uncomfortable or unusually strong emotions;
- difficulty concentrating;
- aches, pains, digestive system problems;
- disruptions to relationships that follow from the above privately experienced symptoms.

The most commonly recognized victims of post-traumatic stress have been military combat veterans. There has been a growing realization that post-traumatic stress also affects victims of rape and other sexual and physical abuse and persons involved in hostage situations, terrorist acts, and other similarly traumatic man-made as well as natural disasters. Symptoms are also experienced by many people whom we do not usually view as "victims." Police officers, firefighters, emergency medical personnel, whether professional or volunteer, regularly deal with traumatic events in the course of performing their jobs. Their training prepares them at the time to deal with these events procedurally, dictating a protocol to follow in the presence of specific circumstances and conditions. This structure serves a valuable purpose not just for the primary or direct victims they serve, but for the emergency responder as well, making it possible to "keep one's head" in an extremely stressful, often life-and-death situation. These well-developed guidelines, however, do not address the subsequent personal disruption often experienced by these individuals.

Even though many professionals involved in this kind of work know that stress reactions are common, this cognitive awareness does not make symptoms less likely to occur or any easier to experience. The response can be frightening, isolating, and may cause the individual to doubt his or her ability to continue functioning as an effective team member. Denial of the reality or severity of the symptoms is common, but the symptoms take their toll, nevertheless. It is in the best interest of all involved to reduce the degree of stress among responders and by doing so maintain emergency service personnel's ability to perform their jobs. This is not only (or even primarily) for the benefit of the public who depend on their services. This confidence in one's ability to do the job is crucially important to the emergency service provider. It is also important that the individual's life away from the job is not adversely affected by the stress that originates on the job.

CRITICAL INCIDENT STRESS DEBRIEFINGS FOR EMERGENCY SERVICE PERSONNEL

A critical incident stress debriefing (CISD) is a structured process with the goals of addressing and moderating traumatic stress symptoms and building group cohesiveness among participants (Johnson, 1992). The American Red Cross has recently committed itself to providing disaster

mental health services, including stress debriefings, for not only citizen victims, but for Red Cross volunteers and staff as part of its disaster relief services. This is in recognition of the toll that stress takes on all involved, distinct from and in addition to the physical impact of a disaster.

Jeff Mitchell (a firefighter/paramedic who became a psychologist) and George Everly of the International Critical Incident Stress Foundation developed a format for doing stress debriefings with emergency service providers who may experience post-traumatic stress due to exposure to events outside the normal range of human experience. Mitchell and Everly (1993) cite earlier traditions, including Freud's psychoanalysis, that indicate the benefits of talking about personal experiences, especially traumatic ones. Some of the earliest "debriefings" were done by Dr. Glenn Srodes, who had unstructured conversations with troops after the invasion of Normandy in World War II. The D-Day conversations allowed soldiers to verbalize in sequence:

1. "Let me tell you my story."
2. "Let me tell you the worst part about it."
3. "Tell me I'm going to be OK." (Mitchell & Everly, 1993)

The subsequent reduction in self-reported stress and anxiety in these soldiers, and their apparently improved ability to continue with their responsibilities in the days that followed, had implications for others in analogous situations.

Mitchell's and Everly's (1993) model is a seven-step process that moves from an introduction and discussion of the factual details of the event, through an *acknowledgment* (not a required *expression*) of the reactions that participants may be experiencing since the event, to a teaching phase emphasizing the normalcy of the range of stress responses. A closing phase gives some practical directions for caring for oneself with communication, exercise, dietary, and other strategies.

Mitchell's and Everly's (1993) seven CISM phases and their thrust (C-cognitive or E-emotional) are described briefly:

Introduction - C

Facilitators introduce selves, explain format and purpose.

Confidentiality is emphasized and no notes are taken.

This debriefing is distinguished from an "operations critique."

Fact Phase - C

Each participant describes his/her role and actions during the event.

"What did you hear/see/smell during the incident?"

IJSSW, April 1995

Thought Phase - C » E

"Have you had any thoughts about the incident that you'd like to share?"

Reaction Phase - E

"What was the worst thing for you at the time?"

Symptom Phase - E » C

"Did you experience anything unusual at the time?" or

"Has your life changed in any way since the incident?"

Teaching Phase - C

Leader(s) teaches about stress responses and how to manage them.

Emphasis is on the normalcy of experiencing symptoms of stress.

Re-Entry Phase - C

Questions are answered and participants are reassured that they are OK.

The meeting is summarized and participants are reminded of the confidentiality pact.

Participants are provided names of follow-up resources.

Debriefers always operate as a team of at least one mental health professional (who leads the debriefing) and one emergency service provider "peer," each with formal training in the debriefing model. Debriefers are people who have not been directly involved in the incident itself. Their focus must not be diverted by personal feelings/responses concerning the actual event. The size of the team depends on the size of the group being debriefed, with a mental health/peer duo for every five to six participants. The trained peer is present to emphasize the reality and normalcy of the stress response symptoms and the value of debriefing from the perspective of a believable "I know because I've been there" source. The peer's validation of both the stress response and the value of the debriefing are invaluable. The mental health professional leads the debriefing, given his or her expertise in group process. Continuing "cross-training" is important for the mental health professional, such as spending time on job sites with emergency room staff, law enforcement, firefighters, and emergency medical services personnel. This provides additional legitimacy in the eyes of emergency service personnel, who often see mental health professionals as not-to-be-trusted "shrinks" who threaten their job security with a label of unstable or crazy. Debriefings typically last 2 hours or more and are always voluntary on the part of participants, who are asked, nevertheless, to remain for its duration once they commit to taking part.

SCHOOL CRISIS RESPONDERS AS EMERGENCY SERVICE PROVIDERS

Members of school crisis response teams are similar to emergency service workers in some significant ways. Having professional obligations in times of crisis, school crisis teams must attend to the needs of the victims. While the stress of the event does affect team members at the time (sometimes in a positive way, helping to "kick us into high gear" and keeping us intensely focused), team members are not allowed the luxury of dwelling on personal reactions or expecting care from others. There is a job to do; perhaps "emotional first aid" is a good term for it. While tools are different - whether weapons, ladders, axes and hoses, or needles, splints, and defibrillators, or the use of carefully chosen verbal and nonverbal techniques - the common goal is to restore order, calm, equilibrium, and safety. Besides sharing in the "nobility" of emergency service workers, crisis response team members also share their psychological, if not physical risks. This is draining work. While success can be exhilarating and incredibly satisfying, team members see a lot of pain, feel responsible for failures that are not their fault, and suffer the effects of job-related stress.

A DEBRIEFING MODEL FOR EDUCATION SETTINGS

Mitchell's and Everly's (1993) debriefing model has obvious usefulness in the school setting. There are various ways to adapt it, depending on the specific circumstances, as well as the person doing the debriefing. Kendall Johnson, in his School Crisis Management: a Team Training Guide, (available from AEA Keystone's professional library) proposes a protocol for what he calls a "cumulative traumatic stress debriefing" (1992). He sees the need for debriefing crisis team (Keystone's TERT) members after they have endured a number of events either as a team or simply vicariously through the clients they serve. Johnson's method, while thorough, may be too elaborate and bulky; it involves flip charts, chalkboards, and sorting out the relative significance of several events in order to focus on the most important ones. An alternative to Johnson's method is a modification of Mitchell's and Everly's (1993) model, with the differences and similarities addressed below.

Cognitive vs. Emotional Focus

Mitchell's and Everly's (1993) seven-step sequence is carefully constructed to be a teaching, not a counseling approach. Emergency Service Personnel (ESP) are familiar and comfortable with structure by the nature of their jobs, so this characteristic is a strength of the debriefing format. They generally have a strong need for control, which includes controlling (sometimes suppressing) one's emotions. They perceive the "touch-feely" world of counseling as loose, involving the surrender, even if only temporarily, of self-control. They are apprehensive about an event that risks the loss not just of personal, but professional control, made even more unacceptable because it occurs before an audience of professional colleagues. CISD carefully guides participants in a discussion about emotional issues that may be occurring outside of the immediate setting of the session, while avoiding any expectation that participants actually express emotions right then and there. Emotional expression by participants does happen at times, but when this occurs, the individual's dignity and the importance of "saving face" are priorities for the debriefers. There is neither tender comforting, physical reassurance (with touch, such as patting or hugging), nor confronting, probing, or exploration of deeper issues that arise in the debriefing session. Any of this that is necessary will occur privately outside the debriefing in a follow-up contact. One of Mitchell's (1993) operating rules for crisis intervention is "never un-box in a session what you cannot re-box in a session."

Educators tend to be more comfortable than ESP at sharing on an emotional level, so there is not as strong a need to carefully navigate through emotional issues. Participants' contributions will often be more emotionally laden than those by the previously mentioned counterparts. This is not necessarily a problem; it is simply a difference in the comfort levels of the two groups of professionals. There is no need to suppress participants' expression of emotions, but the focus of teaching and moving through the debriefing sequence is still important. Participants should not be allowed to transform the session into group therapy or even individual therapy in front of an audience, even if the particular participant (and perhaps some of his/her colleagues) is more than comfortable with, if not experiencing some gratification from this display. Mitchell's (1993) unboxing rule still applies to debriefings for educators. Those in the mental health arena are aware that therapeutic benefit is not the exclusive realm of "therapy" and that even an educational process like a debriefing yields therapeutic effects. Still, it is important to recall the focus of a stress debriefing and to resist the urge to indulge the counseling impulse when the opportunity presents itself. It is not appropriate in this setting.

When

Mitchell and Everly (1993) recommend holding a debriefing from 24 to 72 hours after the event as an ideal, but up to several weeks post-event is still worthwhile. Most debriefings lose effectiveness if not held until 8 to 12 weeks after the event, but later is better than not at all for an incident that is still producing significant stress reactions after this long. The readiness to receive help is the most important factor. The details of the event and the extent of its impact on the affected staff are considerations in deciding whether to have a debriefing several weeks beyond the "ideal" time.

Duration

Critical incident debriefings for emergency service personnel generally take 2 to 3 hours. This is attributable to a number of reasons. First, it takes time to recount the details of direct involvement in the situations that typically prompt a debriefing with this population - accidents, fires, and other emergencies involving serious injury or death. Also, when participants represent assorted professions who do not know all of the details of one another's responsibilities, this clarification is an additional educational component that takes time. Second, the seven-phase process, designed to carefully move participants from the cognitive to the emotional and back again, is not something that can be rushed. Third, a lot of the information concerning normal stress response is covered at some length, on the assumption that much of this is new, or at least not familiar to participant. For groups that have had previous debriefings, this phase may not take quite as long. Also, the team takes care to have each debriefer, mental health as well as peer support, contribute during the course of the debriefing, sometimes carefully planning the transfer of primary dialogue from the mental health to the peer before returning to the mental health leader for closure.

While the process and goal are the same for a debriefing in an educational setting, many of the above characteristics are different, resulting in a significantly shorter debriefing. First, the actual event usually can be recounted much more briefly in most cases. Unless the traumatic event actually occurred at school and was witnessed by several people, personal accounts will consist mostly of vicarious trauma - dealing with students' personal reactions to an event that happened outside of school to someone they knew. In most debriefings, the "event" will not be an accident, disaster, or death, but will be the participants' experiences dealing with students (and often parents) in the course of implementing the TERP plan. Participants also generally know one another well and need no clarification of one

another's roles in the response. Teachers, administrators, counselors, and secretarial/support staff already understand how the others work.

Mitchell's and Everly's (1993) seven-step format is altered to six steps, explained later by this author, since there is usually less need to deal with participants' resistance to sharing on an emotional level. Educators tend to be more comfortable with jumping into the expressive realm, contrasted with ESP who have to be gradually "walked" to this stage. Another streamlining modification is that a single leader conducts the debriefing (see below). This saves time that would be necessary to ensure each debriefer's participation in some way.

Another reason for keeping a school debriefing short is that most of the participants are simply unable or unwilling to commit to 2-plus hours at the end of a school day, which is when most debriefings will occur. This reality complements the above-described modifications, allowing for a 60 to 90 minute debriefing. People will either become restless and simply leave after about this long, or they may even decline to participate when told at the beginning that participation is voluntary and that they should anticipate over an hour of time commitment.

Debriefers

One of the critical requirements of a CISD debriefer is also applicable in this educational setting version. The debriefer needs to be someone who has not been involved in the actual team response to the event. Members of the TERP team are in need of debriefing; one of these persons cannot simply change hats/roles and debrief colleagues after an incident in which he or she has served. Bring in a colleague uninvolved with the team response to the event. This does not even need to be someone who normally works in the educational setting. There are (at least in the Dubuque area) mental health professionals trained in the debriefing model who may be available to work in this capacity.

A characteristic of CISD with ESP that is not necessary is the involvement of "peer" debriefers. Given the familiarity, as well as professional overlap between teachers and counselor-types such as school social workers, having a trained teacher-debriefer on the team to stress the benefits of the process to his or her peers is unnecessary. A single debriefer is sufficient to lead the group. The normal ratio of 1 debriefer for every 5 to 6 participants may not be needed for the school setting. The author has conducted school debriefings with 20 participants without a co-leader.

Participants

It is best to include everyone involved in responding to an incident, not just the core staff, however "core" is defined. It is a mistake to include only teachers, administrators, and LEA staff (who have been there daily and will continue daily) but to exclude the outside support staff (who come in just for the event) on the grounds that they do not share the same history of relationships with staff or students, or that they will not have to be there in the future to deal with the long range effects. The same can be said for debriefing only the "specialists" who do the counseling for students, and excluding teachers, secretaries, and associates who have more routine responsibilities or who may sit in the critical background while the psychologist or social worker guides the class discussion of the incident. The sharing of the experience as a team is the relevant characteristic, not the previous, immediate, or future relationship(s) with the students. To allow a hierarchical separation of counseling, administrative, teaching, and secretarial staff disregards the significant experiences and real needs of many of these people.

Sequence

The following six-step sequence for a school debriefing is offered:

Introduction

Leader introduces self and explains format and purpose.

Clarify that this is not counseling/therapy, but still confidential.

Explain that it is not an "operations critique" of the TERP plan.

Presence and participation are voluntary; give an estimate of the duration.

Fact Phase

Each participant describes role/experiences during the event:

"What was your role?/How did the day go for you?"

Reaction Phase

"What was the hardest part for you?"

Symptom Phase

"Have you experienced any unusual/uncomfortable reactions or emotions since the event?"

"Have you been surprised at how you've felt/acted since the event?"

IJSSW, April 1995

Teaching Phase

Explain that participants' responses to previous questions are normal.
Explain the normal stress responses: physical/emotional/cognitive.
Teach participants how to manage stress (hand out list of stress reducers/hints).

Wrap-Up Phase

Answer questions and reassure participants that they are O.K.
Summarize the meeting; remind participants of the confidentiality pact.
Provide information about follow-up resources.

Notice that the Thought Phase from Mitchell's and Everly's (1993) CISD format is omitted here. This is because this population is much more ready to jump into sharing emotions and personal feelings than are ESP, so this additional step, which helps to make this shift for the other population, is not needed. It is also important to understand and explain to participants the meaning of "voluntary" participation, even for those who choose to attend. No one has to say anything if he or she chooses not to. Any person can simply "pass" on any question as it is asked. A significant benefit of being at a debriefing is hearing one's colleagues express, and thus validate, feelings and experiences that an individual is having. One does not have to share aloud to benefit from the process. This option must be stated at the beginning and respected without comment when exercised.

The leader simply poses the question of each above phase, and the participants (seated in a circle, ideally) respond in turn around the circle. The leader thanks each individual for sharing/responding and then proceeds to the next person. The pattern is quickly apparent to participants, who follow suit readily. Experience affirms that with a large group (close to 20), three times around the group asking questions reaches the limit of comfort before moving on to the teaching phase. With smaller groups, another round in response to the question, "When were you most proud?" has some benefits. It re-focuses the group on strengths, rather than suffering, and it sets a new tone of looking to the possibility of healing and growth.

The phase of teaching about stress responses and giving directions about how to deal with them can be as detailed or as brief as the leader chooses and is knowledgeable. The following handouts are valuable for participants to take with them, not just for their own use, but for the benefit of partners/spouses who also could use the information to help with the individual's recovery.

CONCLUSION

This guide is offered with the hope that experiences and initiatives with schools can help us to continue to discover new ways to address unmet needs, not just of students and parents, but of professionals also. The possibility of doing debriefings for parents has potential. The debriefing format has value with parents with appropriate modifications. The potential size of such sessions may require alterations. Such debriefings may resemble presentations to the group, with some limited sharing rather than a format that assures each participant the chance to respond to a series of questions. It would still have the basic goal of stress reduction and building on strengths to take people past the disabling effects of a crisis.

Author's Notes:

My recommendations for debriefing LEA and AEA staff after a traumatic event originated with experiences by Keystone AEA 1 school social worker Vince Vanden Heuvel and me as members of the Dubuque CISD team. We each have had the opportunity to conduct school debriefings, modifying Mitchell's model for the educational setting. I thank Vince for his discussions with me on this subject. I am also grateful to the members of Dubuque's CISD team for all that I have learned from them over the past 3 years.

Mitchell and Everly insist on specific training for debriefers, which covers human response to crises, the clear distinction between therapy and the debriefing process, and the specifics and sequence of his model. While I feel that this training is valuable, I am reluctant (not to mention simply unable) to demand such training of my colleagues prior to doing debriefing in the school setting. I feel that the current skill level of many school social workers makes doing a school debriefing within their range of skills. Many of the differences between CISDs with emergency service providers and school debriefings described in this paper make a school debriefing much "easier" (though I use that word with hesitation) than formal debriefings with ESPs. I still strongly agree with Mitchell's and Everly's insistence on specific training for debriefers before working with the emergency responders as part of a CISD team.

I welcome hearing your contributions on this topic.

"HELPFUL HINTS"

AFTER A CRISIS OR STRESSFUL/TRAUMATIC EVENT

Try some of the following suggestions to alleviate the effects associated with traumatic events and crises:

- Structure your time - keep busy
- Try to rest a bit more
- Contact friends
- Eat well-balanced and regular meals (even when you don't feel like it)
- Try to keep a reasonable level of activity
- Physical activity is often helpful
- Re-establish a normal schedule as soon as possible - routines are healthy
- Express your feelings as they arise
- Talk to people who love you
- Keep a journal; write your way through sleepless periods
- Do things that feel good to you
- Don't make any big life changes
- Do make as many daily decisions as possible, which will give you a feeling of control over your life
- Realize that you're not "crazy" - your reactions, however uncomfortable, are normal
- Use your sense of humor
- Avoid alcohol and other drugs
- Diet
 - Decrease salt
 - Decrease sugar
 - Decrease red meat
 - Decrease caffeine
 - Decrease carbohydrates
 - Increase protein (chicken and fish)
 - Supplement with Vitamin C, B2, B6, Calcium, Magnesium (Stress Tabs)

SUGGESTIONS FOR FAMILY MEMBERS AND FRIENDS

- Listen carefully
- Spend time with the stressed person
- Offer your assistance and a listening ear even if they've not asked for help
- Help your partner with everyday tasks like cleaning, cooking, caring for the family, minding children
- Give him/her some private time
- Don't take anger or other feelings personally

Don't tell your partner that "you're lucky it wasn't worse." Traumatized and stressed people are not consoled by those statements. Instead, tell the person you are sorry such an event has occurred and you want to understand and assist him/her.

Long Term Stress Management

Increase leisure
Planned routine physical activity
Increase social activity
Meditation
Recreation
"Retail Therapy"
Decrease workload
Clarify responsibilities
Relaxation exercises
Peer support groups
Communication
Priority list
Vacation
Rest
Flexibility
Evaluate long-term goals/especially career

NEGATIVE STRESS COPERS

Some examples of how not to take care of yourself

Alcohol:	Drinking to change your mood Using alcohol as your "friend"
Denial:	Pretending that nothing is wrong Lie to yourself, ignoring the problem
Drugs:	Abusing coffee/aspirin/medications Smoking pot, using pills
Eating:	Bingeing or dieting Using food to console yourself
Fault-Finding:	Having a judgmental attitude Complaining, criticizing
Illness:	Headaches, nervous stomach, major illness Becoming accident prone
Indulging:	Staying up late, sleeping in Buying on impulse, wasting time
Passivity:	Hoping it gets better, procrastinating Waiting for a "lucky break"
Revenge:	Getting even Being sarcastic, talking mean
Stubbornness:	Being rigid, demanding your way Refusing to be wrong
Tantrums:	Yelling, moping, pouting, swearing Driving recklessly
Tobacco:	Smoking to relieve tension Smoking to be "in"
Withdrawal:	Avoiding the situation, skipping school/work Keeping your feelings to yourself

Worrying: Fretting over things
 Imagining the worst

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Steve Heer, MSW, has been a school social worker with Keystone AEA since 1980. He was involved in the formulation of Keystone's Traumatic Event Response Plan, and since 1992, he has also been a member of the Dubuque Critical Incident Stress Debriefing Team, which serves emergency responders in the Dubuque area.

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**THE INTERVENTION MODEL OF
SCHOOL SOCIAL WORK
AS USED BY GREEN VALLEY
AREA EDUCATION AGENCY 14**

Danette Harrington, Sally Madsen, Kaye Hanna,
Lora Hight, Ray Franklin, Sandra Sickels

ABSTRACT

The Green Valley Area Education Agency 14 social workers have evolved a model of school social work practice that delivers direct intervention services. This intervention model focuses on direct, action-oriented interventions. Individual, family, and group counseling are the most common services offered. Consultation with parents, administrators, teachers and staff, the use of a Crisis Intervention Team, and linkage and referrals to community services are other important features of the Intervention Model.

The Green Valley Area Education Agency 14 (GVAEA) of Iowa, with central offices located in Creston, Iowa, has provided educational support services to eight southwestern Iowa counties since 1975. This eight county area is characterized by its geographical remoteness and the lowest per capita income of the state. Each of its counties are considered rural, impoverished, and lacking in community resources. It is an area similar to what Bedics (1987) has noted:

Rural people who live in poor areas have lower levels of education than the rural non poor. Poor rural areas also have a lower rate of investment in per pupil expenditures for an education. In those rural communities with low income, there is a lack of resources to provide basic community services and facilities. (p. 49)

Within this framework, GVAEA has endeavored to provide the best quality educational services possible with the hope of empowering the people of this region to overcome the financial and educational barriers facing many of them.

Surprisingly, school social workers were not employed at GVAEA until 1989, when a pilot project, initiated by the AEA's Director of Special Education, was undertaken to determine if the need, utilization rate, and response of the school districts would be strong enough to justify school social work services. As a result of that project, GVAEA now has a complete department of six MSW school social workers. This includes a supervisor who combines supervisory duties with direct practitioner services.

THE CHALLENGE

Working in an impoverished, rather remote area with scarce regional transportation services brought challenging hurdles to the GVAEA's School Social Work Department (SSWD). While many Iowa SSWDs implement a diagnostic and referral model of service, GVAEA found this impractical. With community services, especially mental health facilities not readily available, and Department of Human Services assistance in short supply, it quickly became apparent that direct service to students and their families would have to be provided by GVAEA itself if students were to be best served and results were to be attained. The needs of the area indicated that this region required a particular style of school social work to be effective. This is in accordance with a Northwest Regional Child Welfare Training Center, University of Washington School of Social Work finding: A "style of practice has evolved among social workers in small communities and rural areas that captures some of the essential elements of case management, prevention, and early intervention" (Horner & O'Neill, 1981, p. 1). Additionally, the roles of school social workers in GVAEA and the area's regional characteristics replicate some of the Washington considerations. These include

- large geographical distances to travel to clients;
- extended role demands covering a wide range of problem-solving activities;
- separations from professional support systems and traditional agency supports;
- increased visibility of social workers;

The Intervention Model

- social structures and power bases differing from urban areas;
- scarcity of formal resources.

The Washington School of Social Work also found that child welfare rural practice settings could promote empowered families. Factors such as a focus on ecological and social considerations, as well as the use of teamwork and the blending of multiple helping systems, were found to contribute to rural social work effectiveness. With all of these aforementioned elements in mind, GVAEA molded its style of practice to best suit the needs of its clients and the region it serves. Hence, the evolution of the Intervention Model of school social work within GVAEA occurred.

THE NEW SERVICE DELIVERY STRUCTURE

This Intervention Model is in contrast to some other delivery approaches used in the recent past by AEA School Social Work Departments in Iowa. These AEAs have found it necessary to adhere to the philosophy that school social workers should and need to be involved in every referral for special education. In GVAEA this would result in a disproportionate percentage of time spent seeking for problems or dysfunctions that do not exist. Time management factors arise when efforts are made with well-functioning students to determine if any significant changes have occurred since the last contact and if progress is being made in the educational program. This can cause documentation and paperwork to abound. As GVAEA has discovered, this involves a lot of "down time" that could otherwise be utilized by direct intervention with referred students who have existing problems. Through this Intervention Model that GVAEA has adopted, the school social worker is able to provide direct interventions that would normally be available in a more urbanized community and is enabled to reduce the tedious efforts of making contacts where social work services are not necessary nor justified. Monthly and yearly statistics, as a consequence, reflect a true picture of individuals that are directly served.

This Intervention Modality focuses on direct, action-oriented interventions. Group, individual and family assessments, and counseling are the main thrusts of the social worker's efforts. An emphasis on collaboration between school social worker, student,

school, family, community, and state agencies is necessitated within the context of maintaining confidentiality. Inter-agency councils and multidisciplinary team meetings have been developed to facilitate these collaborative efforts. This is in line with the reasoning supplied by Mermelstein and Sundet: "Resource availability is a big problem. Aggressive leadership in networking...is needed" (1986, p. 21). Indirect interventions, such as consultation with school personnel, are frequent and often provide follow up to the direct services offered. Where appropriate and possible, referral and linkage to community service agencies are conducted.

Assessments are for the main purpose of determining the presenting problems, underlying causes, and for planning an appropriate course of intervention. The student is perceived "in system," i.e. as part of a family, a school, a community, etc. Interventions involving these different aspects of the student's ecosystem are common. In line with this reasoning, individuals are seen holistically as physical, mental, emotional, and spiritual beings. The Intervention Model attempts to individualize the persons served, maintaining the capacity to be flexible and adaptable. It is a modality that enthusiastically provides a caring, supportive counseling environment as direct interventions are delivered. Three areas of focus are used to develop and implement these individualized interventions:

1. The presenting primary and secondary problems are assessed and evaluated.
2. The student is seen "in system," with the relationship between school, home, and community discerned.
3. Intervention is offered as soon as possible within a supportive and caring relationship, often at the first contact.

GVAEA school social workers, using these three areas, work to assist the school in providing an environment in which the student can learn and grow educationally to the maximum of his or her potential. As Moore and Powe indicate in their article on school social work in a rural setting: "The public school system offers the most beneficial setting for the effective use of social work in preventing the problems of school age children..." (1980, p. 75). The school social work program

is centered on the belief that the main purpose of any educational system is to provide educational opportunities for all children that will enable them to maximize their potential

creatively and usefully. Individual counseling, group sessions and referral to appropriate social agencies are all preventive methods which seek to help the child better utilize the educational resources of the school. (Moore & Powe, 1980, p. 75)

Staudt (1989), in her analysis of school social work, indicated that Individual Building Service Plans for school social work services performed near the beginning of the school year would increase the effectiveness of social work practice and would help to clarify the school social worker's role. Finding this to be true, Individual Building Service Plans are conducted by GVAEA school social workers early in the school year to determine individual schools' perceptions of what school social work services are needed. The administrators, teachers, and staff surveyed by this method are asked to prioritize school social work services, according to the needs of their school. The 10 possible services offered are as follows:

1. Explain to parents/guardians their child's educational program.
2. Consult with teachers about situations in or out of the school environment that may affect his or her learning and propose interventions that may be helpful to the student's ability to function at school.
3. Provide a social assessment on those students whose social, emotional, or behavioral functioning is interfering in the learning process. Depending on the situation, this assessment may consist of student observation, student interview, teacher interview, parent interview, and parent/teacher completion of various rating scales. The goal of the assessment is to determine the appropriate interventions that are needed.
4. Provide individual and group student counseling.
5. Provide parent or family counseling.
6. Serve as a member on staffing teams on an as-needed basis.
7. Deal with and effectively handle crisis situations or serve as a member of GVAEA's Crisis Intervention Team on an as-needed basis. Crisis situations are treated as a top priority, and adequate resolution or referral is obtained before prioritizing of the situation is lessened.
8. Serve as a member of the Student/Teacher Assistance Team at education agencies on an as-needed basis.
9. Provide inservices to educators and/or parents.
10. Provide referrals to the appropriate agencies/services when situations and needs dictate.

While emphasis is given to special education students, school social workers also become involved with other students on a short-term basis, if needed. The following behaviors or characteristics may indicate a need for school social work services:

- Frequent fighting and aggressive behaviors;
- Excessively shy or withdrawn behaviors;
- Recent loss or grief;
- Defiance and insolence;
- Trouble making and keeping friends;
- Poor social skills;
- Evidence of excessive family difficulties seen at school;
- Stealing;
- Lying;
- School avoidance;
- Other such behavioral and emotional concerns.

In addition to counseling services, teacher consultation is a common response to these problems.

CONCLUSION

GVAEA has continued to evolve its Intervention Modality since its first year of service in 1989. With its emphasis on aiding the school system in providing the most appropriate education possible to its students, the Intervention Modality has proven to be of tremendous asset to all the systems involved, i.e. student, school, family, and community. It has given GVAEA the needed tool to empower the people of this rural and impoverished region to overcome the barriers prohibiting many in receiving their rightful education.

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Note: Acknowledgement is extended to special contributors Sally Feldhacker (LSW) and Barbara Wampler (LSW).

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THE FORMATION OF THE SCHOOL SOCIAL WORK ASSOCIATION OF AMERICA

Charlene Struckman

ABSTRACT

This article provides a brief history of the events that preceded the school social work leadership retreat that was held in Illinois in July, 1994. Several participants' experiences show the similarities and differences in school social work practice that exist from state to state. Such shared experiences affirm the value of school social workers learning from one another in a national forum. Reasons behind the growing consensus to establish a separate national school social work association will be described.

The School Social Work Association of America was formed on Sunday, July 24, 1994, in Edwardsville, Illinois. Sixty school social workers from 19 states, including Jim Clark and Charlene Struckman from Iowa, met on the campus of Southern Illinois University for 3 days. On Friday evening, after an afternoon of small group brainstorming and large group sharing, the decision was made to move forward to create a new national organization for school social workers. The process of defining the organization began on Saturday. On Sunday an interim steering committee was named and a statement of purpose was written. The statement of purpose reads as follows:

The School Social Work Association of America is dedicated to promoting the professional development of school social workers to work with students and their families in order to enhance their education experiences. This will be accomplished by

1. Offering opportunities for ongoing professional development.
2. Opening nation-wide channels of communication and information sharing.

3. Responding in a timely and efficient manner to the changing needs of school social workers.
4. Influencing public policy and educational issues.
5. Demonstrating school social workers' effectiveness through evaluation and research.
6. Linking home, school, and community on behalf of students and their families.

The nine persons named to the steering committee were Lorraine Davis (Wisconsin--at large), Daisy Westra (New York--at large), Frederick Streeck (Washington--National Coalition of School Social Workers), Doug Riley (Georgia--Southern School Social Work Council), Nina Neupert (Wisconsin--Midwest School Social Work Council), Renee Levine (Pennsylvania--Northeast Area School Social Work co-delegate), Sheila Schwartz (New York--Northeast Area School Social Work co-delegate), Corrine Anderson-Ketchmark (Washington--Western School Social Work Alliance), and Randy Fisher (Illinois--at large), Chair.

THE DECISION-MAKING PROCESS

The decision to form a separate school social work organization was not easy for the 60 participants. The journey to that point in time had been laborious and complex. Significantly, school social workers had been among the five professional membership associations and two study groups that merged on October 1, 1955, to create the National Association of Social Workers (NASW) (McCullagh, 1994).

School social workers developed their first association, the National Association of Visiting Teachers and Home and School Visitors, in 1919. This was less than 20 years after the emergence of the first school social workers, who were called "visiting teachers" (McCullagh, 1994). These early school social workers attempted to identify with both education and social work. Over time, however, the identification with social work became stronger (McCullagh, 1994).

Since 1955, NASW has grown to become a large national membership organization made up of social workers from many different settings. School social workers have become a very small minority, estimated at 6 percent, of the total NASW membership.

IJSSW, April 1995

Substantive issues in school social work have not always been addressed adequately by NASW. Especially after a reorganization that resulted in the abolition of the NASW Education Commission in 1991, dissatisfaction among school social workers has grown stronger.

This dissatisfaction resulted in a leadership meeting, held in St. Paul, Minnesota, on October 5, 1991, to discuss national issues for school social workers (School Social Work Leadership Meeting, 1991). The 30 participants, including Al Flieder and Jim Clark from Iowa, considered such issues as certification or licensure for school social workers, networking with counselors and psychologists at the local and national levels, the use of paraprofessional aides, the role of BSW level social workers in schools, the need for state consultants, the changing roles of Individuals with Disabilities Education Act funding for school social workers, and public awareness of school social work. The need for a national school social work organization was addressed then by the participants.

The decision was made to not form a national organization at that time, but rather to develop a national agenda by creating a committee called the School Social Work 2000 Planning Committee, which consisted of three members—Lyn Lewis, Kentucky; Bob Goodwin, Kansas; and Frederick Streeck, Washington (School Social Work Leadership Meeting, 1991). This committee gathered information and made a number of recommendations, which included establishing a National Clearinghouse on Best Practices in School Social Work with an Advisory Committee and fundraising effort to support it. The Committee also recommended that a national conference be held (School Social Work Leadership Meeting, 1992).

From the work of the Social Work 2000 Planning Committee and the discussion at a leadership meeting held in Illinois in 1992, the decision emerged to create the Clearinghouse and its nationally-representative Advisory Board. On Saturday, January 23, 1993, an historic meeting took place in Seattle, Washington. On this date the new National Coalition for School Social Work was established in order to pursue the recommendations from the School Social Work 2000 Planning Committee. Jim Clark and Al Flieder represented Iowa on the Coalition.

At a Midwest Council meeting in March, 1994, discussion centered around the creation of a national organization. It was difficult to pursue the charge of the Coalition without an organization

and the ability to generate sufficient resources. The Coalition had sought out funding sources but with only limited success.

Randy Fisher indicated that Illinois was planning a summer retreat at Edwardsville in July, 1994. Illinois was willing to contribute \$2000 in order to make the retreat a national gathering charged to discuss possibilities and barriers to creating a national organization. The Midwest Council voted to support such a retreat and recommended that an outside facilitator be hired (Midwest School Social Work Council, 1994).

The invitation then went out to school social workers across the United States to come to Edwardsville. Some who came had been involved in the work of the leadership meetings and the Coalition, and they were ready to develop a framework for a national organization. Many others, however, came with less awareness of the need for a national organization. At the Edwardsville gathering many participants expressed support for working within the structure of the newly emerging Social Work Section of NASW in order to strengthen that organization's efforts on behalf of school social work. As the afternoon and evening of Friday, July 22, 1994, concluded, a strong consensus to build a national organization for school social workers separate from NASW was also emerging. These two positions, to strengthen school social work within NASW or to form a new, separate national school social work organization, seemed deadlocked. Then a new idea, providing a bridge between those two points of view, began to take shape. Jim Clark, from Iowa, was one of the participants who suggested that a choice did not have to be made and that it was possible to do both.

This third option, forming a new national school social work organization as well as strengthening the position of school social work within NASW, won the day. This idea of creating a new national organization with close ties to NASW appealed to school social workers who had been frustrated with their minority status in NASW and the National Education Association. After a day of discussion, a sense of unity was building among the participants. As each voice rose to fill the room, a new accent could be heard. School social workers from New York, Texas, Georgia, New Mexico, Oregon, and a number of midwest states joined in the discussion. Although the voices and accents were different, the feelings and needs expressed were in harmony.

Small group discussions and frequent breaks provided opportunities for participants to share their experiences. As they did this, many differences in the delivery of school social work services became apparent. Similar professional goals and critically significant service delivery experiences were also apparent. Participants began to see the value of school social workers learning from one another in a national forum.

SERVICE DELIVERY: THE WAY IT IS

Margaret Prentiss and Melanie Holt came to Edwardsville from Georgia. They described the role of school social workers in Georgia and provided materials from their state association. Like school social workers in Iowa, they are often spread thinly over large rural areas. Their responsibilities, however, include services for both regular and special education students. In the rural areas of Georgia school social workers are still sometimes called "visiting teachers." In order to qualify for a renewable professional certificate to practice school social work in Georgia, an applicant must complete an approved program in school social work at the masters level or higher (Department of Education, 1993). School social workers in Georgia assess and intervene to facilitate the social, emotional, behavioral, and adaptive functioning of students. The most prevalent services include conferences with parents, families, students, and school staff.

Renee Levine, past president of the Pennsylvania Association of School Social Work, described school social work practice in Pennsylvania. Her state organization has 110 to 135 members. Certification is provided under the title "Home and School Visitor," as in Georgia, a reminder again of school social work's roots in the visiting teacher movement. Workers may be called "home and school visitors" or "school social workers." Not everyone hired in these positions has the appropriate certification. Certification of persons performing social work tasks in the schools was a concern voiced by many state representatives.

Levine indicated that school social work personnel in her state serve all children, both in special education and regular education. They participate in child study and multidisciplinary teams

that provide special education services. They also may provide other services. For example, Levine is the coordinator of a program for pregnant and parenting teens in her district.

Levine described a system with Intermediate Units that sounds similar to Iowa's AEA structure. In Pennsylvania there are three levels of educational systems--the state level, the Intermediate Unit level that includes 29 intermediate Units covering 67 counties, and the local school district level. The state of Pennsylvania previously provided funds under P.L. 94-142 through the Intermediate Units. Now these funds are given directly to districts that use them to purchase services from the Intermediate Unit or to provide their own services. The trend has been for the local districts to provide their own services.

Corrine Anderson-Ketchmark, President of the Washington Association of School Social Workers, indicated that in Washington a school social worker may be called "student assistance specialist," "behavior interventionist," "intervention specialist," "school social worker," "school counselor," or "family support worker." Certification requires an MSW to practice as a school social worker, although the certified person can fill any of the positions mentioned above. While school social workers can be school counselors, school counselors cannot fill a school social work position. The "student assistance specialists" are funded through regular education dollars. "School social workers" were more likely to be funded through special education. Some positions have mixed funding.

Anderson-Ketchmark is often the case manager for behaviorally disabled children. She makes referrals to other agencies, works with resistant families, does social skills training, group and individual counseling, consultation with principals and teachers, and sometimes chairs the multidisciplinary team. She described a close working relationship with school psychologists in her state. Anderson-Ketchmark's assignment is exclusively in the area of special education, but she does do short-term interventions with students before identification for special education assessment.

Ann List, a participant from New Mexico, indicated that there are two licenses for school social workers in New Mexico. One is a state license and the other is an education license. School social workers must have both in order to practice in the schools. In New Mexico, however, school social workers at both the MSW and BSW levels are licensed and hired. New Mexico is one of the states in which school social workers have strong ties to the state NASW

IJSSW, April 1995

chapter, and, as a result, representatives from this state were hesitant to support a national organization that might be perceived to be in competition with NASW. This was a specific concern expressed by many other participants.

CONCLUSION

These and many other interchanges indicate that, while many differences exist in the degree levels, types of certification and licensure, funding structures, and title, school social work itself is very similar from state to state. Shared experiences at the Edwardsville retreat produced a sense of camaraderie and the belief that much could be gained from close professional association. The school social workers who gathered in Edwardsville were accustomed to being a minority within both social work and education organizations. In Edwardsville, however, school social workers found the opportunity to be part of "something" in which they would be the majority, and their agenda would be the first concern.

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BOOK REVIEW

SCHOOL-BASED ASSESSMENTS AND INTERVENTIONS FOR ADD STUDENTS. By James M. Swanson, PhD, K.C. Publishing, 1992.

James M. Swanson is Professor of Pediatrics and Director of the University of California at Irvine Child Development Center. His stated purpose is "to help educators understand and respond to the new Federal guidelines about ADD (Attention Deficit Disorder)" and "to present the assessment methods which have been evolving at UCI-CDC since 1985." This volume covers the psychiatric and educational definitions of ADD, the current and pending regulations and legislation affecting ADD children, comprehensive assessment, and educational interventions.

Swanson supports the establishment of an educational definition of ADD that is comparable to other educational disabilities. He recommends a comprehensive assessment and presents three teacher rating scales that can be used to assess ADD and suggest intervention strategies.

In Swanson's view, stimulant medication is usually a temporary intervention with limited long-term effects that offers a "window of opportunity" to intervene with other treatments. Behavior therapy offers a more permanent approach to the chronic problems of ADD. Swanson presents background information on behavior therapy and specific applications in the educational setting for ADD students. He advocates for the use of frequent positive reinforcement, enhanced positives, occasional soft reprimands, and very occasional loud reprimands. Development of reinforcement strategies and token systems are discussed and illustrated in detail.

The UCI-CDC staff have formulated three models for school-based interventions for ADD students. These models are The Parallel Teaching Model for mildly impaired students in the regular classroom, the Paraprofessional Model for moderately impaired students who need supplementary services in the regular classroom, and The Multicomponent Model for severely impaired students with coexisting disabilities who need placement in self-contained classrooms. The Parallel Teaching Model trains teachers to scan the room and provide

Book Review

redirection and reinforcement to the ADD student(s) while conducting academic instruction. The Paraprofessional Model trains teachers' aides to use parallel teaching strategies, to implement a token economy system, and to run small social skills groups. The Multicomponent Model uses intensive behavior intervention in a special class, daily social skills training, parent involvement, and double-blind pharmacological trials.

Swanson's book advocates for proven interventions for ADD students in order to improve their classroom performance. He presents the recommended behavioral interventions in sufficient detail so they can be replicated in other educational settings. This book is highly recommended to teachers and other educators who are trying to meet the needs of ADD students in the classroom.

Kate McElligatt, LSW
AEA 7 School Social Worker
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GAME REVIEW

STOP, RELAX, AND THINK.

Childsworld/Childsplay, Center for Applied Psychology Inc., King of Prussia, PA, 1990.

This is an excellent psychoeducational tool for helping children learn and practice techniques for self control. It is a valuable game to help impulsive children begin to think before they act. It is recommended for children ages 6 to 12 and is designed for 2 to 6 players.

The three major areas covered in the game emphasize skills in controlling motor behavior, learning relaxation, and problem-solving techniques. The reviewer has used this game and has found that children respond well to it. Children can begin to use the basic concepts of verbalizing rather than acting out problems. The techniques can then be reinforced with each individual child and generalized to other settings for the maximum learning experience.

Lora Hight, MSW, LSW
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BOOK REVIEW

TIME OUT: ABUSES AND EFFECTIVE USES.

By Jane Nelson and H. Stephen Glenn, Sunrise Press, Fair Oaks, CA, 1992.

This easy-to-read book provides practical, step-by-step guidelines for parents and educators to encourage self-discipline, cooperation, and problem-solving skills in children. Although time out is one of the most popular disciplinary techniques used in homes and schools, it is often a humiliating and discouraging experience for children. The authors emphasize, therefore, that time out can be a positive experience that helps misbehaving children cool off, feel better, and change disruptive behavior to constructive behavior. They explain the difference between positive uses of time out that create an atmosphere of mutual respect and humiliating uses that hurt the child's dignity and self-esteem. The authors elaborate on understanding the goals of misbehavior, eliminating punishment and reward, the appropriate use of logical consequences, and getting children involved in solutions. By implementing the strategies in this book, parents and educators can encourage positive, long-range results in children by helping them assume control and responsibility for their own behavior.

Sandra Sickels, MSW
AEA 14 School Social Worker
Creston, IA

ANNUAL MEMBERSHIP MEETING

SCHOOL SOCIAL WORK ASSOCIATION OF AMERICA

July 28, 29, and 30, 1995
Minneapolis, MN

***Agenda:**

- Approve the constitution and bylaws
- Nominate a slate of officers
- Refine the work of the steering committee
- Attend workshops

For information about registration, contact

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***Details forthcoming**

ANNUAL MIDWEST SCHOOL SOCIAL WORK CONFERENCE

**“School Social Workers Creating
Communities for Change”**

September 28, 29, and 30, 1995
Blackhawk Hotel and RiverCenter
200 E. 3rd Street
Davenport, IA 52801
319-323-2711

For information about registration, contact

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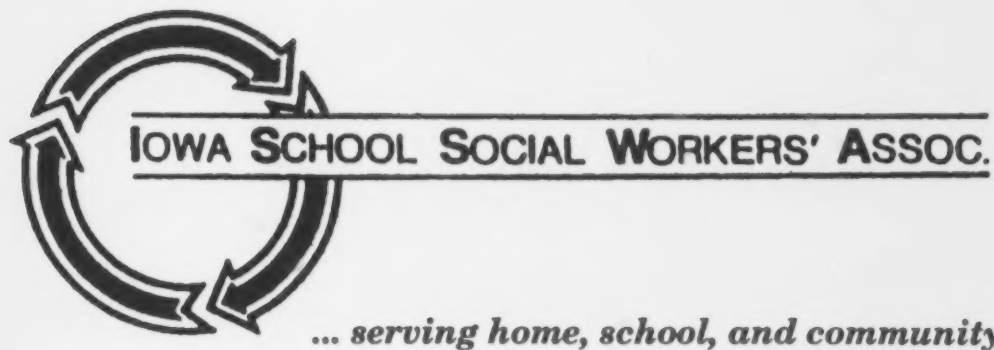
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IOWA JOURNAL OF SCHOOL SOCIAL WORK

EDITORIAL COMMENTS

- Cheryl McCullagh ----- 3

ARTICLES

- Improving Services For Students
With Behavior Disorders
Charlene Struckman, Frank Darrah, and Dennis Sinclair ----- 5
- Jane Day - First Visiting Teacher:
"You Did A Noble Work and Did It Well"
James G. McCullagh ----- 22

PRACTICE INNOVATIONS

- An Anger Control Program For Students
With Behavioral Problems
Becky Schmitz and Steve Presley ----- 32
- Generalist Special Educators
Out of School Social Workers?
Tom Adams and Laura Heitland ----- 54

BOOK REVIEWS

- The Parent's Guide: Solutions To Today's Most
Common Behavior Problems in the Home
Danette Harrington ----- 59
- Win the Whining War & Other Skirmishes:
A Family Peace Plan
Danette Harrington ----- 60

EDITORIAL COMMENTS

A 10-Year Rendezvous with Commitment

The Iowa Journal of School Social Work is celebrating its 10th year, a decade of professional service. The first issue of the Journal was published in the spring of 1986.* Thank you to all of those who have made the Journal a reality over the past 10 years—the authors, editors, Journal Editorial Board members, Iowa School Social Workers Association Board members, the State School Social Work Consultant, production personnel, etc. We have been one of three such existing school social work journals in existence since the beginning of our professional school social work history. The trail has not been an easy one. This particular issue of the Iowa Journal of School Social Work has been a “BEAR” to “get out of (or into?!) the cage,” so to speak.

We all are struggling for the time, energy, and commitment to write, to do research, and to share our practice expertise, but we have much to appreciate and to applaud. The following chart profiles a brief visual presentation of the Iowa Journal's professional publication contribution since its inception:

Type of Article	Number of Articles	Number of Different Authors	Single-author Articles
Philosophy, Legal, Historical	16	13	12
Assessment	6	11	2
Service Delivery Structure	5	14	3
Descriptive Intervention	18	27	11
Research	8	12	2
Bibliographies	5 (1 = in 3 issues) (1 = in 2 issues)	2	2
Position Statements	4	4	4
Book Reviews	21	21	21
Video Reviews	1	1	1
Game Reviews	1	1	1

*The fact that there are only 9 volumes and occasionally only one issue per volume reflects gaps in publication due to the lack of submitted manuscripts.

Let us note that most authors are from Iowa, and most are school social workers. Significantly, only 13 of the total of 63 authors who contributed to writing articles (this does not include book, film, or game reviews) are "repeat" authors, that is, they wrote singularly or co-authored more than one article. The encouraging conclusion is that we have had a relatively broad-based, statewide authorship for our articles. We need to address the fact, however, that most of our authors are from Iowa; we need to seek or "go after" articles from a broader regional/national base.

It is good to see that intervention has been the strongest focus of our journal, backed strongly by articles pertaining to the philosophical, legal, and historical roots that undergird our professional movement. We do need to acknowledge, however, the lack of research-based articles in our journal, and I would challenge our readers to engage in research studies and to publish those studies. Funding for intervention programs is based increasingly on the positive outcome of research studies. As professionals, we must increasingly commit ourselves to garnering research data that affirms the effectiveness of our school social work interventions.

As school social workers, we are "coming into our own," so to speak. The emergence of the School Social Work "Section" of the National Association of Social Workers and the triumphant organization of the School Social Work Association of America are testimonies to the strength and relevance of school social work. We are professionals who are uniquely skilled and trained as macro- and micro-system change artists—specialists in social/environmental systems assessment and interventionists who are trained to impact those environments. We may be "young" historically as a profession, but we are avant-garde. We are creative interventionists who are on the cutting edge and are driven and molded by the needs of our children, our families, our schools, and our societies. We are the grass-roots, down-home, and skilled protagonists who are dedicated to helping children and families who need assistance to survive and to live in healthier ways. Hopefully, our skills will not be limited in the future to those who are in special education. Our skills need to address the whole society of students in our public schools.

Thank you for your service. Thank you for your commitment. And, remember, we are required by our Professional Code of Ethics to share our knowledge. This includes the written publication of our works. I challenge each of you to accept this call.

Cheryl McCullagh

IMPROVING SERVICES FOR STUDENTS WITH BEHAVIOR DISORDERS

Charlene Struckman, Frank Darrah, and Dennis Sinclair

ABSTRACT

This article describes a study that is based on a literature review, a review of student files, and a written survey of teachers, principals, and support special education staff. The purpose of the study was to gain insight that would help to reduce the number of students with behavior disorders who require special education services and to enable more of these students to be successful in the regular education mainstream. The results of the study indicate a need for more training for regular education teachers regarding behavior interventions, managing children with Attention Deficit Hyperactivity Disorder, and problem solving. The study also indicates a need for better communication between regular and special education teachers and clearer exit criteria for students to leave special education.

Area Education Agency 7 (AEA 7), an intermediate unit providing special education services to 24 school districts in northeast Iowa, initiated an informal study in 1993 to discover ways to reduce the number of students with behavioral difficulties who are identified as requiring special education services and to enable more students with behavior disorders who do need special education services to be served in less restrictive settings. The study was in response to concerns from the AEA 7 Director of Special Education and the Iowa State Department of Education about rising numbers of students with behavior disorders and the restrictiveness of the programs serving those students. The AEA 7 supervisors of school social work, school psychology, and consultants/strategists were charged with assessing the agency's services for students with behavior disorders.

To achieve this goal the group of supervisors developed a series of hypotheses to address the concerns that were being expressed about the identification and integration of students. This article focuses on three of these hypotheses.

1. There is lack of a clear, systematic routine for interventions with students in regular education.

2. Regular education teachers are aware of a limited number of management techniques to address the behavior problems that students exhibit.
3. There is lack of systematic reintegration procedures for students in special education programs when students are ready to return to regular education classrooms.

The assumption was that if there were more systematic routines for intervening with acting-out students, and if regular educators had a larger or better repertoire of management techniques, fewer students would be placed in special education as a result of disruptive behaviors. In addition, there was an assumption that if there were a more systematic approach to reintegration, more students with behavior disorders in special education programs could receive their instruction in less restrictive settings.

In order to address these hypotheses, the supervisors first reviewed the relevant literature. Two primary assessment activities then were utilized. These assessment activities included a file review for 50 students with behavior disorders and the development of surveys to be sent to regular and special education teachers, principals, and special education support staff.

LITERATURE REVIEW

Incidence

National studies estimate that from 3 to 10 percent of all school-age children have emotional disturbances that are serious enough to warrant intervention (Knitzer, Steinberg, & Fleisch, 1990). Prior to the enactment of Public Law (PL) 94-142, the United States Department of Health, Education, and Welfare estimated that 2 percent of school-age students would qualify for services under the category of "seriously emotionally disturbed" (SED) (Koyangi & Gaines, 1993). In 1993, however, only .89 percent of school-aged children nationwide were served under a SED category (Knitzer et al.; Koyangi & Gaines, 1993; The Peacock Hill Working Group, 1991). This would suggest that the number of children served in this category nationally is less than those who should be served by normative standards.

The national figures may be lower because of the variations in identification criteria from state to state. This is, in part, because the federal label and definition are advisory rather than mandatory. Each state has the option of using the federal label and definition or adopting its own, provided that what is adopted does not vary significantly from

the federal model. This has resulted in a plethora of labels and definitions for disabilities.

One issue particularly has generated a heated debate among educators. The federal definition regarding emotional disabilities contains a sentence that reads as follows: "The term (seriously emotionally disturbed) does not include children who are socially maladjusted, unless it is determined that they are seriously emotionally disturbed" (34 Federal Regulation [CFR], Sec. 300.568). One interpretation has been to justify the exclusion of acting out, aggressive, and conduct disordered youngsters from special education services. Special educators who agree with this interpretation believe that many of the students who receive special education services under emotionally or behaviorally disordered categories are not actually eligible because they are "socially maladjusted" (Wood et al., 1991; Forness, Kavale, King, & Kasari, 1994; Clarke et al., 1995). Other educators argue that to exclude such a large group of students runs contrary to the intent of the United States Congress to educate all students who fail to make academic progress because of their disabilities as stated in PL 94-142 and confirmed by court decisions. These educators argue that placement decisions about eligibility should be made on the basis of the student's educational needs rather than diagnostic categories that have limited relevance for education (Wood et al.).

In some states, such as Nevada, the exclusion of students who are socially maladjusted, apart from those who are seriously emotionally disturbed, has resulted in lower number levels of students who are served under this disability category. Iowa, on the other hand, takes the more inclusive position and includes these students under the umbrella category of "behavior disorder" (BD). This may account for the fact that Iowa's numbers of students who are served in this category are higher than the national average.

While students who are labeled BD/SED appear to be underserved nationwide, they are having the greatest difficulty of all students with disabilities in achieving academically. They have an average grade point of 1.7 out of 4.0, as compared to a 2.0 out of 4.0 for all students with disabilities. In addition, 43 percent of them drop out of school before graduation, as compared to 27 percent of all students with disabilities who drop out. They have a higher risk of becoming involved with the criminal justice system. While still in high school, 19.8 percent of students with serious emotional disturbances are arrested, as compared with an overall arrest rate of only 9 percent for all students with disabilities. Of youth out of school for 2 years, more than a third of the SED students are arrested, as compared with 18.9

percent of all students with disabilities. The SED students are 2 1/2 times more likely to be arrested than youth in the general population (Koyangi & Gaines, 1993). While students with behavior disorders, therefore, on a national level are less likely than students in other disability categories to be served within special education, they are students who, by many measures, appear to most need these services.

Identification

The factors that determine eligibility for services in a behavior disorder category are those involving the pupil's overt behavior and the degree to which that behavior violates the normative standard. Patterns of behavior, including aggression, noncompliance, disruptive verbalizations, withdrawal, tantrums, and inappropriate social skills are associated with behavior disorders (Glassberg, 1994). Caseau, Luckasson, and Kroth (1994) divide the reasons for referring students for special education services based on student behavior into two general categories. The first, external behaviors, includes aggression, noncompliance, disruptive verbalizations, withdrawal, tantrums, and deficient social skills. The second, internal behaviors, includes withdrawn behavior, lack of motivation, depression, low self esteem, and suicidal ideation. Of the students identified with behavior disorders, 86.6 percent were referred for external behaviors, and 13.2 percent were referred for internal behaviors.

In addition to behaviors that violate normative standards, the issue of need as a requirement for entitlement to special education services is receiving more emphasis. Need for special education services can be demonstrated by showing that the problematic behaviors are resistant to modifications in regular education. This would require staffing teams to demonstrate that the student's needs cannot reasonably be met solely in the mainstream (Grosenick, George, George, & Lewis, 1991). This emphasis has led to the growing use of problem-solving teams and a problem-solving approach to design and document interventions in the mainstream.

Programming

Nationally, over 80 percent of the students who are identified by the schools as having behavior disorders are served in regular public schools. Of these, 35 percent spend some part of the day in a resource room; 37 percent are served in a self-contained class; and 10 percent are served in a regular classroom. Of those served outside the regular school setting (18 percent), 12 percent are in day treatment programs, and 88 percent are served in some form of segregated setting (Knitzer et al., 1990).

In recent years the school reform movement has included the idea of inclusion, which, in its most extreme form, would eliminate the current special education service delivery model and replace it with a model that provides services for all students within regular education settings (Stainback, Stainback, & Ayres, 1996). The benefits of maintaining all students with behavior disorders in regular classes is far from being confirmed (Lewis, Chard, & Scott, 1994; MacMillan, Gresham, & Forness, 1996; Meadows, Neel, Scott, & Parker, 1994). Despite the popular movement for placing students in integrated settings, recent research shows special programs to be more effective than regular classes in promoting academic achievement and behavior change for students with behavior disorders (Schneider & Leroux, 1994).

More research is needed to demonstrate what is the least restrictive environment for students with behaviors disorders. It is unlikely that the outcome will point in only one direction, as advocates for full inclusion sometimes propose. Each case will need to be evaluated individually to determine what is the best placement for a particular student (MacMillan et al., 1996; Downing, Simpson, & Myles, 1990; Fuchs, Fuchs, Fernstrom, & Holm, 1991). Despite the pressure for inclusiveness, students with behavior disorders continue to be proportionately more likely to be served in a categorical placement than students with any other disability category (Lewis et al., 1994).

Criticism of Current Programs

A 1990 (Knitzer et al.) examination of programs for students with behavior disorders resulted in serious criticisms for these programs. Self-contained classes are criticized for their emphasis on behavior management to the exclusion of concern for the acquisition of academic skills. In addition, teachers utilized limited teaching strategies in these classes despite the advantage of reduced classroom size. Students frequently had limited and artificial opportunities to practice social skills through interactions with peers both within the special class setting and in the mainstream. Even in the less restrictive settings, children often did not have opportunities to interact with non-identified students in a positive way. Only minimal mental health services or therapeutic experiences were observed, and few opportunities for support to families were in place (Duncan, Forness, & Hartsough, 1995). Transition in and out of special education was poorly planned and implemented.

Promising Programs and Strategies

Databased interventions with continuous assessment and monitoring of progress are gaining popularity. This is because of the belief that they produce enhanced effectiveness, greater generalization and maintenance, and more individualized intervention strategies (Clarke et al., 1995; Kern, Childs, Dunlap, Clarke, & Falk, 1994). These types of assessments are frequently associated with problem solving, which provides a formal process for gathering data, designing interventions, and evaluating outcome.

Many of the model programs do not rely on new techniques but on a combination of traditional approaches. Treatments are matched to the problem and its severity. Treatments may involve integrating social skills training, pharmacological intervention, family treatment, and parent education in order to produce positive outcomes (The Peacock Hill Working Group, 1991; Kazdin, 1987; Kazdin, Bass, Siegel, & Thomas, 1989; Kazdin, Esveldt-Dawson, French, & Unis, 1987; Kendall, 1985; Etscheidt, 1991). Advances in technology are also bringing about innovations. Technology-based interventions, such as the use of video taping with self-assessment and self-modeling, have been shown to be effective in helping young children to acquire cooperative classroom behaviors, generalize these behaviors to other settings, and maintain them over time (Lonnecker, Brady, McPherson, & Hawkins, 1994; Dunlap & Childs, 1996).

A review of recent literature shows that most intervention research continues to have been conducted primarily in special education classrooms or in residential programs. The emphasis has been to evaluate such traditional approaches as the use of social skills training and the manipulation of consequences (Dunlap & Childs, 1996). Much research is needed before the real potential of promising practices and new model programs can be determined.

RESEARCH METHOD

Subjects and Setting

The files of 50 students with behavior disorders were selected by drawing every 10th name from an alphabetized list of students with behavior disorders served by schools in AEA 7 during the 1992-93 school year. This represented 5 percent of the total number of students with behavior disorders who were served within AEA 7 in that year. Forty-eight percent of the students came from a mid-sized metropolitan area in northeast Iowa with a population of 100,000. Fifty-two percent

of the students came from the smaller towns and rural areas in the geographical area around the metropolitan area served by AEA 7. Fourteen percent of the students attending schools served by AEA 7 were African American, while 18 percent of the students with behavior disorders in this sample were African American. Seventy-six percent of the students were males and 24 percent were females. Half of the students were in preschool through Grade 6, and the other half were in Grades 7 through 12.

Two percent of the students in the sample were served in a regular class with support services; 44 percent were served in a resource room; 20 percent were served in a special class with integration; 22 percent were served in a contained room with little integration; and 12 percent were served in a segregated setting. The females in this sample tended to be served in less restrictive settings than the males. Fifty percent of the females were served in resource programs; forty-two percent of the males were served in resource programs. African Americans, however, tended to be served in more restrictive settings. One hundred percent of African American males and 66 percent of African American females were served in a special class of some kind.

The children in the sample tended to be identified for special education in preschool or early grades. Sixty-four percent of the children had been identified by the end of third grade, and 92 percent had been identified by the end of sixth grade. These figures were higher for the African American students. Eighty-nine percent of them had been identified by the end of the third grade.

The cognitive ability and academic achievement levels from the students' most recent evaluation were examined. In most cases these scores were from the Wechsler Individual Scales of Intelligence. Twenty-eight percent had intelligence scores of 100 or above; 48 percent had scores of 85-99; 14 percent had scores of 70-84; and 2 percent had scores of 65-69. No testing data were available for 8 percent of the sample.

Thirty percent of the students in the sample had grade level achievement scores in their last formal evaluation. Twenty-six percent were 1 year below grade level, and 36 percent were 2 years below grade level. No formal data were available about achievement for 8 percent of the sample.

The issues that brought about the original referral for evaluation and identification of a behavior disorder were examined. In descending order, the behaviors that were identified in the initial evaluation are as follows: failure to complete work; off-task behavior; school rule violations; poor peer interactions; verbal and physical

aggression; anxiety; negative mood; low self esteem; school avoidance; impassivity; and withdrawal. There were differences among the sub-groups. For white males, failure to complete work was the most frequently noted behavior. For both African American males and females, however, verbal and physical aggression were most frequently noted. For white females, the most frequently identified behavior was poor peer interactions, which represented 84 percent of the needs mentioned for this group.

Pre-evaluation interventions that were tried and their duration were also evaluated in the review. Prereferral interventions were those listed on the prereferral form that requested an accounting of these activities. This form is a required part of a referral for evaluation by AEA 7. In 22 percent of the cases no pre-evaluation interventions were documented. Thirty-six of the 92 interventions described in the case records lasted less than 2 months. Only 15 of the 92 interventions had been tried for a year or more. The most frequently mentioned interventions were modifying the curriculum, home/school communication, and behavior management plans.

A variety of other documented factors included notation of the student's socioeconomic status, services from other community agencies, and diagnosis from mental health agencies. Socioeconomic backgrounds were measured by Medicaid eligibility that was reported because of reimbursements for services provided by AEA 7. Thirty-six percent of the students were eligible for Medicaid. Sixty-two percent of the cases in the sample did document services from other agencies.

Not all reported a diagnosis from mental health agencies. Even though this information was not always documented, 34 percent of the students in the sample were diagnosed with Attention Deficit Hyperactive Disorder (ADHD) by a community agency. Among white males in the sample, 50 percent were diagnosed with ADHD. This diagnosis was most often reported because the student was receiving medication at school. Only 4 percent of the sample documented other mental health conditions. Those diagnoses most often were depression and oppositional defiant disorder.

The Survey

Population and Sample

The population that was surveyed consisted of regular classroom teachers and principals in the 25 school districts served by AEA 7, special education teachers serving students with behavior disorders, and school psychologists, school social workers, and consultants/strategists employed by AEA 7. Three different surveys were mailed to each of these groups. Every building received surveys, but principals decided which regular education teachers would respond

to the surveys. All teachers of students with behavior disorders and AEA 7 psychologists, social workers, and consultants/strategists had an opportunity to respond to the survey. A total of 1088 surveys were distributed. The survey return response from this population can be seen in Figure 1.

Survey Group	Number of Responses	Percent of Return
Regular classroom teachers	358	44
Principals	60	51
Special education teachers	30	39
Special education support	45	66
Total	496	46

Figure 1

Survey Responses and Results

The surveys focused on the interventions that were perceived as available to students with behavior problems in the schools. In response to the question, "When students in your classroom present challenging behavior, does your school apply a systematic approach to address those behaviors?", 59 percent of the regular education teachers responded "always" or "usually," and 41 percent responded "sometimes" or "never." Ninety-four percent of the principals, however, responded "always" or "usually," and only 6 percent said "sometimes" or "never." This difference in perceptions between administrators and teachers seems to suggest that consistent systematic approaches to managing challenging behavior are not well established in many schools.

This assumption is supported by the examination of the open-ended responses of teachers. When asked to describe the systematic approach to address challenging behavior used in buildings, the most frequently occurring approaches were such traditional responses as intervention by the principal (20 percent of the responses) or interventions by the teacher (17 percent of the responses). Only 12 percent of the responses identified systematic procedures, and only 3 percent of the responses described a problem-solving process. Only 8 percent of the principals described a specific system with levels of consequences. When regular education teachers were asked to describe the most successful interventions they used, a wide range of approaches were mentioned. The most frequently mentioned are as follows: classroom rules; behavior contracts; verbal warnings; student conferencing; parent contacts; notes home; and modified materials.

When asked, "Do you feel that students with behavior disorders should be integrated into regular class instruction?", 59 percent of the regular class teachers said, "Yes," while 41 percent said, "No." Seventy-five percent of the responses of those opposing integration expressed concern about the learning environment for other students. Another group of teachers supported integration, if students with behavior difficulties do not disrupt the learning of others (28 percent of responses) or if such behavior is not too severe (20 percent of responses).

Regular education and special education teachers had different perceptions regarding the process of integration. Fifty-six percent of regular education teachers said they "always" or "usually" met with the special class teacher to discuss the needs of a student being integrated in their class. The remaining 44 percent said that they "sometimes" or "never" met with the special class teacher. Special class teachers perceived themselves as having more contact with regular education teachers than regular education teachers acknowledged. Eighty-seven percent of the special class teachers indicated that they "usually" or "always" met with the regular class teacher prior to integrating a student in their class.

In addition, 48 percent of the regular education teachers said that there was "always" or "usually" a behavior management plan maintained between themselves and the special class teacher. This contrasted with the reports of 83 percent of the special education teachers who said that they "always" or "usually" maintained a behavior management program between themselves and the regular class teacher. Twenty-three percent of the special class teachers described regular class teachers as "very cooperative" in making needed adaptations for students with behavior disorders that were integrated into their classroom. Significantly, only 4 percent of the support staff considered regular class teachers to be "very cooperative" in making needed adaptations for students integrated into their classrooms.

When regular education teachers were asked to describe the challenging behavior that occurred most frequently in their classroom, these behaviors were--in descending order from most frequently to least frequently mentioned--disrespectful, defiant, poor attention, low motivation, verbal and physical aggression, and disturbing others. Principals also mentioned disrespectful and defiant behaviors most often. On the principals' lists, physical aggression was most frequently listed, followed by poor peer interactions and not following school rules. The differences in emphasis may be related to those behaviors that most likely resulted in an office referral.

Special education teachers and support staff rated behaviors that most often keep students with behavior disorders from being reintegrated into regular classes as follows: rule violations; not following directions; off task behavior; impulsive behavior; talking out; disrespectful and disruptive behavior; and failure to complete assigned work. This list was similar to the list given by teachers, in that task-related behaviors, such as motivation, work completion, and not following directions, were prominent acting-out behaviors. All groups in the sample listed accommodations for ADHD problems as the area most needing staff development training.

DISCUSSION

Analyses of the information gathered in this study has led to a number of conclusions. Concerns expressed by the AEA 7 Director of Special Education and the Iowa Department of Education about the rising numbers of students with behavior disorders and the restrictiveness of the programs serving those students were substantiated. The rates of students with behavior disorders is higher in Iowa than in the nation and higher in the school districts served by AEA 7 than in other special education agencies in the state. The number identified, however, is in line with the normative estimate of needed services made by the United States Department of Health, Education, and Welfare before PL 94-142. The distribution of students in different levels of programming as noted in the literature review is consistent with the sample in AEA 7. In fact, nationally, 20 percent of the students were served outside of the public schools, and in AEA 7 only 14 percent are served outside of the public schools. Similarly, the reasons for referral and identification are consistent between the data noted in the literature review and the data from the AEA 7 sample. The comparison data gathered for this study, therefore, indicates that numbers and distribution of programming in AEA 7 are not out of line with national norms.

The data gathered in the study does seem to support all three of the original hypotheses. First, there does appear to be a lack of clear and systematic interventions with students who present challenging behavior. This is demonstrated by the lack of agreement between principals and regular class teachers. In addition, problem-solving teams that have been emphasized for several years by the Iowa State Department of Education and by AEA 7 staff are mentioned in only 3

percent of the responses from regular class teachers. Only 12 percent of the teachers describe a system that sounds like a consistent building-wide plan for dealing with behavioral problems. Given the disagreement among educators, it is conceivable that students often may be unsure about the consequences of their behavior.

Second, the data indicates that regular education teachers are aware of a limited number of behavior management techniques. While many types of interventions were mentioned, only a few were endorsed by the large number of respondents. Also, the interventions described were frequently such traditional responses as sending a student to the principal's office. Overwhelmingly, regular education teachers expressed a desire for additional training in techniques for managing students with ADHD. Given the large number of students within the population with behavior disorders in this sample of students from AEA 7, upgrading the skills of educators to manage these students could reduce the number who will need special education services.

Third, the hypothesis that there is a lack of systematic reintegration procedures is also supported by the study. Regular and special educators had different views about the amount of their collaboration. Forty percent of the regular education teachers were opposed to any integration for students with behavior disorders. Support staff and special class teachers did not give the cooperation of regular education teachers high marks. It is clear from the data that the relationship between regular and special education staff in the integration process could be improved significantly.

Students in the study were identified with behavior disorders at an early age and were removed from regular class settings for a significant part of their education. This is consistent with reports in the literature review. Again, the implication is that there is increased need for effective strategies for reintegration.

This study resulted in a number of recommendations within AEA 7 (See Appendix I). In addition, the study suggests some directions for school social workers who serve these students. The lack of research to support the effectiveness of some of the promising new approaches such as data-based interventions or co-located social services indicates a need to develop additional studies. Many of the promising approaches involve multi-modal, system-based interventions that fit with the skills that school social workers bring to their work with this population. For example, efforts to link school efforts with the community and to provide skilled and specific intervention services to the parents and families of students with behavior disorders are appropriate activities for school social workers. In order for these approaches to become widespread, however, they must be backed by

research data that demonstrate success. Social workers are trained in the skills to develop and publish this type of research.

The need for improved techniques in the reintegration process offers opportunities for school social workers to utilize their skills. Facilitating communication and bringing groups of people together to work on a task are strengths for the social work profession. Social workers are trained to address system change, and many have specific skills in community organization practice. School social workers can work together with other support staff and special and regular education teachers to develop more cooperation and understanding between the various groups involved in education.

APPENDIX I

A number of recommendations for action were formulated by the AEA 7 study team and the focus group. These included the following:

1. Establishing a written set of "best practice guidelines" for interventions and problem solving prior to special education evaluations;
2. Collaborating with regular education to develop preventative services at the preschool and primary grade levels;
3. Collaborating with Educational Services to provide more training to regular class teachers on ADHD and interventions for managing other problem behaviors;
4. Establishing exit criteria, to be reviewed annually, for each student at the time of placement;
5. Utilizing frequent progress monitoring techniques to determine the students' readiness to move to less restrictive programming;
6. Developing ongoing methods of communicating between regular and special educators to facilitate the timely and successful return of special education students to the regular classroom.

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**JANE DAY - FIRST VISITING TEACHER:
"YOU DID A NOBLE WORK AND DID IT WELL"**

James G. McCullagh

ABSTRACT

Jane Day, from New Albany, Indiana, and a teacher for many years, became the first full-time visiting teacher and the first social worker to work from within the public schools soon after becoming the first school social worker to obtain social work training. She, in 1908 on Manhattan's Lower East Side, became the official, school-based link between the home and school and community for the child's welfare. By her professionalism and character, she demonstrated the invaluable and unique contributions made by visiting teachers and spurred the hiring of additional visiting teachers in New York City.

The history of school social work is a "her story" that began in Hartford, Boston, and New York City at the dawn of the Twentieth Century (McCullagh, 1993, 1994a, 1994b, 1995; Oppenheimer, 1925). In New York City, in 1906, a few remarkable women who were working out of settlement houses began forging connections between the home and the school to benefit the child (McCullagh, 1993). By 1907, these home-and-school visitors formed an association with the Public Education Association of New York City (PEA), which assumed a leadership position to promote and accept the work of visiting teachers in New York City (McCullagh, 1993). The successful accomplishments of these earliest home and school visitors encouraged the Public Education Association to raise funds to engage its first paid visiting teacher, Miss Jane Day, full time in a school setting (McCullagh, 1996). This sketch of Day is intended to acknowledge one woman whose work contributed to an emerging recognition of the uniqueness and importance of home-and-school visitors in the school setting. By her deeds, she spurred the hiring of additional visiting teachers, later to be known as school social workers.

THE FORMATIVE YEARS

Jane Day was born in New Albany, Indiana, on February 19, 1858, to Amzi A. and Cornelia Alexander Day, who were married in 1846. Her father, an insurance agent (Floyd County Census, 1870), was a "well known citizen" ("Deaths Doings," 1878). Her parents apparently divorced sometime between 1865 and 1870. Her mother remarried in October, 1888. Jane had three sisters and a brother. One sister, Alice, became a teacher in New Albany in 1874, but died of typhoid fever in East St. Louis in 1878 ("Deaths Doings," 1878). Her father lived in Louisville, Kentucky, for 15 years prior to his death in 1890 ("Amzi A.," 1890). At that time, his three surviving daughters, including Jane, were "among the most highly esteemed ladies of New Albany" ("Amzi A.," 1890).

Little is known of Day's personal life other than the following statement regarding her parents when she indicated that "she was the product of the abnormal home in which the parents do not love one another" ("Pupils Quit," 1926). The New Albany Tribune on May 17, 1935, upon notification of Day's death in New York, featured Day in a front page feature article. The article recalled her accomplishments as a teacher and singer in New Albany and the acknowledgment of "hundreds of friends in the city as a result of her charming personality and because of her exceptional mental attainments" ("Miss Jane," 1935).

Day attended the New Albany high school for 2 years and then completed high school subjects under private tutors. She later completed a 2-year teacher-training program in 1884 under the direction of the Superintendent of the New Albany public schools (Day, 1929a, 1929b). Day, who apparently began teaching at the young age of 16 years, "at once gained a high reputation in educational circles" ("Miss Jane," 1935, p. 1).

From 1889, when she was appointed teacher in the New Albany public schools, until 1906, Day taught special classes for "difficult" children and was, for a time, the principal of the School for Difficult Children (Day, 1929a, 1929b). In the early 1900s Day taught in the fifth and sixth grades (B. C. Menges, personal communication, February 17, 1993). The Superintendent of Schools, writing a letter of recommendation on Day's behalf, commented that "she is one of the strongest teachers that I have ever seen in influencing boys and girls for the best, and particularly boys" (Prosser, 1906). Another school official commented that Day's "teaching has been of the highest character and has been attended with marked success" (Scott, 1907).

During the period 1906-1907, Day was also a resident at Neighborhood House, a settlement house in Louisville, where she was engaged in the investigation of child labor permits for the juvenile court and conducted club and class work (Day, 1929b; Ingram, 1907). During the summer, 1905, Day attended the Columbia University summer session and studied the work of settlements and other institutions (Day, 1929b). In 1906, Day may have met Miss Julia Richman, the first woman school district superintendent of schools in New York City (McCullagh, 1995), who gave a talk on social work in the schools while attending the Department of Superintendence conference in Louisville (Allen, 1928). Day came to New York in the spring, 1907, worked with Miss Richman, and, while living at Richmond Hill House, became acquainted with the work of Home and School Visitors (Allen, 1928; Oppenhemier, 1925). During the summer, 1907, Day was one of 49 students who attended the New York School of Philanthropy's (now Columbia University School of Social Work) tenth summer session ("New York's," 1907).

FIRST IN-SCHOOL VISITING TEACHER

At Richman's request, the Public Education Association secured funds to employ Day to work in the public schools of Richman's school district on Manhattan's Lower East Side in October, 1907 (Allen, 1928; Oppenheimer, 1925; Richman, 1910). With Day's appointment as the first "Home and School Visitor," the fledgling visiting teacher (school social work) movement would take root within the public schools (Allen, 1928). Day, during this first year, became a "Visiting Teacher" in order to differentiate her role from the classroom teacher (Allen, 1928). The "pre-school period" - home and school visiting conducted by workers operating from "outside" the schools in settlement houses - would soon end.

Miss Mary S. Marot (1907, p. 13), chair of the PEA Home and School Visiting Committee, summarized the significant impact that Day, working full-time, had within a few months of service:

Miss Day's success still more fully emphasizes the need for such visiting teachers in the schools. By giving her undivided attention, intensive effort upon individuals or families is possible; daily contact is made with critical cases, and repeated calls upon families to help keep them up to the staying point. In consequence, not only are permanent cures obtained,

but effective prevention. Bad habits have been cured or nipped in the bud by studying all the conditions involved: at school, at home, on the street; hygienic, economic, moral, educational, social.

By the beginning of the 1908 school year, "[p]rinciples of more than fifty schools [had] asked for home visitors" (PEA, 1908, p. 11). In the next 2 years, following Day's appointment, four more visiting teachers were hired, with financial support provided by the Junior League of New York, which had recognized the value of Day's work (Allen, 1928; Richman, 1910). During the 1909-1910 school year, the Public Education Association had engaged 6 visiting teachers (PEA, 1910). By 1913, 10 visiting teachers were engaged (PEA, 1913).

A principal of one of Day's assigned schools wrote on her behalf:

With genuine pride and pleasure I commend the social work of Miss Jane Day who has worked in our schools for the past three years. Her work has been most successful. The reformations she brings about are lasting.

Her sympathy with the delinquent, her firmness in insisting on the things she wants being done, joined to a charming personality, makes her a treasure among social workers in schools or homes. (Carls, 1910)

Another school principal stated to Day that [a]s a means of establishing a relation of mutual understanding and confidence between the school and the home your work has been priceless. The confidence of the teachers in your sympathy and knowledge of their difficulties has won their love and respect. The children and parents appreciate your kindness and justice. I sincerely hope nothing may deprive us of so valuable a help as you have proven. (Tibbits, 1910)

In 1909 and 1910, Day devoted two summers to a study of the feeble-minded at two reformatories in New York (Day, 1929b; Moore, 1911). In 1916, a Professor of Education at the City College of New York wrote to the Director of the Public Education Association commending Day for her contribution to the university's Educational Clinic. Professor Duggan commented that he could not "emphasize too strongly the success that she has had in correlating the work of the [public] school and the Clinic, in interesting our Seniors in the follow-

up work in the homes, and in interesting them in special work for backward children" (Duggan, 1915).

During the summer, 1917, Day was associated with the New York Food Aid Committee. The Director, having written to Day to express his appreciation, commented that "we thoroughly appreciate every effort you have made to make less complex the various tasks that have confronted us" (Van Arsdale, 1917).

Day ended her work as a visiting teacher in 1919 at the age of 61. The principal and teaching staff wrote Day to express their regret upon her resignation to express their "congratulations to those who stole you from us." They continued:

May we not express to you, however, our deep appreciation of the wonderfully successful work done by you while you were with us? Your courtesy, unselfishness, and devotion have had their reflex in backward boys made ambitious and wayward boys made straight. You did a noble work, and did it well" (Bayne, 1919).

The District Superintendent (Conroy, 1925), commented that the "quality of her work was excellent" and described her work:

She visited the home of the pupils, and by her tact and sympathy secured the fullest cooperation of the parents. She made a special study of the capabilities of the pupils so as to assist her in guiding them in the choice of an occupation or further school instruction. Difficult cases of discipline due to home conditions or the aversion of boys of a certain age to attend any school were most tactfully managed by her. She followed up all such cases until the pupil graduated from the school or was discharged for valid reason.

CHARTER MEMBER: NATIONAL ASSOCIATION

On June 4th and 5th, 1919, the Second National Conference of Visiting Teachers and Home and School Visitors was held in Atlantic City in conjunction with the National Conference of Social Work. On the second day, during an historic meeting, the National Association of Visiting Teachers and Home and School Visitors was organized ("National Scope," 1919; "N.A.V.T. Celebrates," 1929). Present was Jane Day, one of 14 charter members and one of 3 visiting teachers who wrote the new Association's constitution ("N.A.V.T.

1929). On June 4th, Day led the discussion on "The Visiting Teacher and Community Problems." A summary of that meeting offers an early perspective on the types of "community projects which Visiting Teachers have helped to establish":

. . . . School day nurseries, school community houses, maternity centers, evening recreation clubs for girls, house-keeping centers, psychological clinics, observation homes for girls, a farm school for neurotic children, study-rooms and special classes, and opportunities for art and musical education. ("National Scope," 1919, p. 4)

THE LATER YEARS

From 1919 to 1921, Day was the Social Director for the Bigelow-Hartford Carpet Company in Connecticut, where her duties included Americanization work with parents and children (Day, 1929b). For the next 2 years she worked as the Educational Secretary for the Mutual Welfare League and established correspondence courses in New York's state prisons through Columbia University, while also serving as the Educational Secretary of the Mutual Welfare League (Day, 1929b).

In 1925, Hunter College engaged Day to give a "course of lectures for parents" (Conroy, 1925). From at least 1931 until just before her death in May, 1935, Day was an instructor for the Hunter College Evening Program (M. Touba, personal communication, August 4, 1995; "Miss Jane," 1935). She taught a course on "Individual Direction in Education" each semester, including summers. The course addressed "[t]he psychology of the unadjusted child; handling of difficult children; the delinquent child; cooperating agencies; individual treatment of all children; developing personality; implanting the social spirit" (Hunter College, 1933). Day's lifetime of professional experience well-qualified her to teach a course that focused on the child to future teachers.

CONCLUSION

Jane Day, the first full-time visiting teacher and the first social worker to work from within the public schools, was also the first visiting teacher to obtain social work (philanthropy) training. Day's appointment as the first visiting teacher in October, 1908, in Manhattan's Lower East Side, marked the beginning of the eventual acceptance by the New York public schools of the value of social work services. In 1919, Day, who at the age of 61, resigned to accept another appointment, was acclaimed for her "noble work" (Bayne, 1919).

The Associate Superintendent of School, writing in 1925 to commend Hunter College for engaging Day as one its extension lecturers, summed up his assessment of her importance to the visiting teacher movement:

In my opinion our city owes a real debt of gratitude to Miss Day for the many ways in which she has urged higher standards of social service and the general welfare of the children of our great city. Probably no one in our city deserves more credit than Miss Day, for the plan by which visiting teachers have been appointed as a distinct feature of our educational system. (Stitt, 1925)

Jane Day epitomized the emerging social work specialty and, by her professionalism and character, demonstrated the invaluable and unique contributions made by visiting teachers. She, by becoming the official, school-based link between the home and school and community for the child's welfare, pioneered an essential social work specialty.

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Day - First Visiting Teacher

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**AN ANGER CONTROL PROGRAM FOR STUDENTS
WITH BEHAVIORAL PROBLEMS**

Becky Schmitz and Steve Presley

ABSTRACT

A 10-week group work program was developed to teach better anger control/anger expression skills to elementary school students served in special education due to their behavior problems. Responses by teachers, students, and parents suggest value in directly teaching anger control strategies. The appendix provides outlines of group sessions and curricula guide/intervention material and resources.

Students and teachers are reporting increasing levels of stress in their lives. As the stress increases, our ability to handle difficult situations seems to decline, and acting-out behaviors and inappropriate expression of anger tend to increase. It is becoming imperative that teachers have effective ways of teaching students how to better control their expression of anger. Research has demonstrated the efficacy of combining both relaxation and cognitive interventions (Hazaleus & Deffenbacher, 1986) in treatment of anger. It has also been demonstrated that anger can be treated in structured group programs that are short-term and cost-effective (Deffenbacher, Thwaites, Wallace, & Oetting, 1994; Goldstein, 1988; Goldstein & Glick, 1987).

Problems with anger control seem to be more pronounced among special education students. This may be due to increased problems with learning and behavior. The authors believed that an impact could be made on student behavior by developing a program that would have the components of relaxation training and cognitive interventions to assist the students in developing more appropriate ways of expressing their anger.

A 10-week program for anger control was developed. This included 2 sessions weekly (one instructional session supplemented by an additional group activity session). Homework assignments were given to practice learned skills during the week. This program was designed for elementary-age special education students who exhibited poor anger control skills. The sessions were led by the school social worker with assistance from the special education teacher, who also guided the homework assignments.

GROUP COMPOSITION

Students were selected from an elementary level multicategorical with integration special education class in rural southeastern Iowa. Students in this program had behavior disorders, or behavior change was a prioritized goal in their Individual Education Plan (IEP). Two 30-minute group sessions per week had been part of the special curriculum, and the anger control curriculum was incorporated during those time slots. The group was composed of eight boys and girls--five fifth graders, one fourth grader, and two second graders. The ages of the students ranged from 8 1/2 to 12 years old. Samples of actual IEP objectives are as follows:

1. Will respond appropriately to typical physical exchanges with peers, such as being bumped, touched, or brushed against;
2. Will respond appropriately to remarks and name calling;
3. Will not use vulgar language or rude remarks;
4. Given constructive criticism, will correct the behavior without arguing;
5. Will reduce impulsive [reactions] and overreactions to certain situations in the classroom;
6. Put downs will be less frequent toward peers;
7. Will accept criticism when there has been wrongdoing on his part;
8. When involved in a group of peers (with physical behavior), he will keep his hands and feet to himself;
9. Will think of ways to act, using stop/think behaviors before getting out of control;
10. Will walk away from stimulating situations to avoid negative consequences.

ANGER CONTROL MATERIALS

The Power of Anger Control Workbook

This anger management program was developed by Dennis Hargis (1992). The workbook contains information revolving around 12 rules of anger control. It is written in an easy-to-understand format with cartoon drawings to illustrate each rule. This workbook is user friendly for the students, and the authors developed a curriculum for the local special education class around the 12 rules offered by Hargis (1992).

[The workbook is available through People in Control, P.O. Box 15744, Lenexa, KS, along with supplementary materials such as a facilitator's manual.]

Additional classroom exercises were developed to augment the anger management program. The students were given homework assignments after each instructional session to complete during the week. The homework assignments are located in Appendix I.

The Anger Control Game

The Anger Control Game, developed by Berthold Berg (1988), was used frequently to supplement the weekly sessions. The game consists of a game board, tokens, die, and specifically-designed playing cards. The cards are drawn by students when they land on certain spaces on the game board. The game cards address specific cognitive-behavioral deficits that are found in aggressive children and have been identified in research literature. The six areas include the following:

1. Ability to empathize with the victim's feelings;
2. Ability to distinguish between aggressive and nonaggressive acts;
3. Ability to use self-statements to diffuse anger;
4. Ability to generate and evaluate alternatives to aggression;
5. Ability to identify feelings underlying anger;
6. Ability to evaluate the opinions of others on aggression.

The group leader has flexibility in designing how the game is played with the student(s). Specific areas can be targeted during game sessions. Areas targeted can be paired with the issues being addressed in the individual or group sessions.

Assessment Materials

ANGER CONTROL: A 30-item scale was written for the purpose of this project. This included several items directly related to anger control and also social skills that are necessary for students to be able to prevent anger-provoking situations. The students answered the items on a 5-point Likert Rating Scale ranging from "never" to "always."

ANGER EXPRESSION: An adult version of the Anger Expression Scale was developed by C.D. Spielberger (1982) to assess the range from suppressed anger to anger that is directed outward. Jacobs,

Phelps, and Rohr (1989) designed a scale for children to measure their stylistics of anger expression. This was titled the Pediatric Anger Expression Scale, and it was adapted to match the structure of the Anger Control Scale. This scale was used as an additional self-report measure of anger.

ANGER CONTROL INVENTORY: This is a 30-item forced choice inventory completed by the students and located in the manual of the Anger Control Game (Berg, 1988). Although this was not used with the current group, it is recommended as an assessment tool.

LOCUS OF CONTROL (LOC): The correlation between locus of control and anxiety has been noted in the research (Nunn, 1988), demonstrating that as children's expectations of being able to control outcomes in their environment increased, their perceived anxiety decreased. It is important to measure the LOC to see if a more internal LOC could reduce the level of anxiety and consequently increase the level of anger control. The Child Nowicki-Strickland Locus of Control Scale (Nunn, 1988) was used.

The assessment materials were used to discover the target behaviors. Group sessions and activities were then planned around the target behaviors. The target behaviors were monitored to ensure that IEP objectives were accomplished.

ANGER CONTROL GROUP SESSIONS

The group sessions occurred over a span of 10 weeks. The agenda below lists the content of the weekly instructional sessions. A supplemental session after each week was used to assist the students with the homework assignment and to involve them in the game activities to support the skills that were learned. Specific intervention method information can be found in Appendix I.

SESSION 1: Rules 1 & 2

Worksheet: Understanding Anger

Homework #1: Trigger and Cues of Anger

SESSION 2: Rules 3 & 4

Homework #2: Anger Can Be Harmful and Useful

SESSION 3: Rules 5 & 6

Homework #3: What Causes Anger?

SESSION 4: Rules 7,8,9, & 10

Worksheet: Anger is a Reaction to Hurt, Loss, or Fear

- SESSION 5: Rules 11 & 12
Homework #4: Give an Example of Forgiveness
- SESSION 6: Ways to Control Anger
Homework #5: Chart of Anger Reducers
- SESSION 7: Useful Expressions of Anger
Homework #6: Good Expressions Chart
- SESSION 8: Self-talk
Worksheet: Reminders--Self-Statements
Homework #7: Self-Statements
- SESSION 9: Videotaping of Role-play Situations Demonstrating Use of Anger Control Techniques
- SESSION 10: Self-Check, Self-Evaluation, and Anger Control in the Long Term (A more detailed log of the sessions is contained in Appendix I.)

DISCUSSION

The response by the elementary students who participated in the anger control group sessions was positive. There was much support from the special class teacher, who frequently reinforced skills and homework assignments. There was also support from the school administration from the beginning of the program. The teacher and students were able to provide anecdotal examples of how the skills that were learned in group sessions were used in anger-provoking situations. Students reported that they used the square breathing technique to cope with teasing and name calling on the playground. The teacher noticed that students walked away and timed themselves out in situations that could have erupted into a physical fight. Students kept an anger reducer chart taped to their desks so that they could keep track of techniques that they used to control their anger.

The authors were pleasantly surprised by the student interest in wanting to apply what was learned to other settings such as home. Some students asked if they could take some of their anger control charts/assignments home in order to monitor their behaviors and responses in the home setting. One parent commented that she observed her son trying some of the "anger reducers" in the home. Many of the examples used by the students in their homework assignments were related to home situations, such as dealing with a conflict with parents over chores or with siblings over electronic games.

In an effort to find sensitive inventories the authors may have been overly zealous and required too many items to be completed. The

authors also may have been better off using a 4-item Likert Rating Scale that would have been easier to discriminate for the students; i.e., students may not have had a tendency to choose the middle response. It may have been more beneficial to focus the assessment on the most problematic areas. The Anger Control Inventory could have been used to track progress in specific areas and supported by participation in the game activities. The literature describes another factor that may have influenced student responses. Hoshmand and Austin (1985) note the importance of the reporter's sense of dissatisfaction with one's anger control in the willingness to self-evaluate his or her own anger control. It was the sense of the authors that through the process of the group sessions the students increased their self-awareness about how they deal with anger, and they may have been more self-critical in completing the homework assignments and assessments.

IMPLICATIONS

A growing number of children with behavior problems are showing deficits in their ability to control the anger that frequently leads to aggressive behavior in the school setting. In addition to the group process, the authors are finding that an anger control program also can be developed with children on an individual basis in counseling. The anger control curriculum that is described here appears to be applicable to both elementary and secondary-aged children and youth. Some of the cognitive exercises were difficult for the younger children, particularly the self-statements, and could be more applicable to middle school and high school students. Sessions can be worked into a regular social skills class or can be incorporated into a regular counseling program. These materials also can be incorporated into a parent education program or into a home-based counseling program. Most of the cited literature is based on intervention programs in residential settings. If such programs or the program presented in this article are applied to educational settings, future studies could focus on whether this intervention approach has potential as a preventative intervention.

APPENDIX I

**WORKSHEET: REMINDERS – SELF-STATEMENTS
THAT MAY REDUCE ANGER**

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

UNDERSTANDING ANGER WORKSHEET

TRIGGERS: OUTSIDE SITUATIONS AND INSIDE THOUGHTS THAT
CAN LIGHT YOUR FUSE

WHAT USUALLY MAKES PEOPLE ANGRY?

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

CUES: THINGS THAT HAPPEN IN PEOPLE'S BODIES WHEN THEY
BECOME ANGRY

WHAT HAPPENS IN PEOPLE'S BODIES WHEN THEY BECOME ANGRY?

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

IJSSW, February 1997

HOMEWORK LESSON #1

**TRIGGERS: OUTSIDE SITUATIONS AND INSIDE THOUGHTS THAT
CAN LIGHT YOUR FUSE**

LIST TRIGGERS THAT YOU OBSERVED THIS WEEK.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

**CUES: THINGS THAT HAPPEN IN PEOPLE'S BODIES WHEN THEY
BECOME ANGRY**

LIST CUES THAT YOU OBSERVED THIS WEEK.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

HOMEWORK LESSON #2

ANGER THAT CAN HAVE HARMFUL OR USEFUL EFFECTS

LIST 2 HARMFUL EFFECTS YOU OBSERVED.

1. _____
2. _____

LIST 2 USEFUL EFFECTS YOU OBSERVED.

1. _____
2. _____

HOMEWORK LESSON #3

DESCRIBE A TIME YOU BECAME ANGRY.

WHAT OR WHO CAUSED YOUR ANGER?

HOMEWORK LESSON #4

GIVE AN EXAMPLE OF A TIME THAT YOU WERE ABLE TO FORGIVE SOMEONE.

IJSSW, February 1997

HOMEWORK LESSON #5

Reducers	Tues	Wed	Thurs	Fri	Sat	Sun	Mon
Breathe							
Count Back							
Think Ahead							
Talk - Adult							
Talk - Friend							
Write A Letter							
+ Self Talk							
Visualize							
Time Out							
Assertive							
Other:							

HOMEWORK LESSON #6

Good Expression	Tues	Wed	Thurs	Fri	Sat	Sun	Mon
Time Out							
Exercise/Physical							
Talk - Friend							
Study/Learn							
Help Someone							
Assertive							
See Their Side							
Change What Expect							
Work for Change							
Other:							

HOMEWORK LESSON #7

REMINDERS: SELF-STATEMENTS THAT MAY REDUCE ANGER

GIVE EXAMPLES OF WHEN YOU USED REMINDERS.

1. WHAT HAPPENED?

REMINDER USED:

2. WHAT HAPPENED?

REMINDER USED:

3. WHAT HAPPENED?

REMINDER USED:

THE TWELVE GOLDEN RULES OF ANGER

1. BEING ANGRY IS AN OKAY FEELING.
2. WHEN PEOPLE BECOME ANGRY, PHYSICAL CHANGES OCCUR IN THEIR BODIES.
3. ANGER CREATES ENERGY IN OUR BODIES WHICH CANNOT BE DESTROYED.
4. ANGER CAN BE BOTH HARMFUL AND USEFUL.
5. THE PURPOSE OF ANGER IS TO MAKE A PERSON AWARE THAT A PROBLEM EXISTS.
6. PEOPLE HAVE A CHOICE ON HOW THEY REACT TO ANGER-- PROVOKING SITUATIONS.
7. PEOPLE DON'T MAKE YOU MAD; YOU CHOOSE TO GET MAD!
8. ANGER TENDS TO CREATE MORE ANGER.
9. ANGER CAN PROTECT US AGAINST PAINFUL FEELINGS.
10. ANGER IS A REACTION TO HURT, LOSS, AND FEAR.
11. WHAT PEOPLE EXPECT FROM OTHERS HAS A BIG EFFECT ON HOW ANGRY THEY GET.
12. LEARNING TO TRUST YOURSELF AND LEARNING TO HAVE COMPASSION AND FORGIVENESS OF OTHERS ARE THE BEST TOOLS FOR COMBATING ANGER.

(Taken from The Power of Anger Control: An Anger Management Program for Students and Adults, by Dennis Hargis.)

	Never	Seldom	Sometimes	Often	Always
12. I am able to stand up for my rights.	1	2	3	4	5
13. I respond to teasing and name calling by yelling back.	1	2	3	4	5
14. I walk away from conflict situations.	1	2	3	4	5
15. I try to come up with something to do besides fighting.	1	2	3	4	5
16. I try to work out a solution when another student is creating a problem for me.	1	2	3	4	5
17. If another student has a complaint about me, I try to handle it fairly.	1	2	3	4	5
18. When playing games, I attempt to compliment others.	1	2	3	4	5
19. I do something to feel better about a situation if I am feeling left out.	1	2	3	4	5
20. I throw things when I get mad.	1	2	3	4	5
21. I write about how I am feeling.	1	2	3	4	5
22. I look for someone to talk to when I am upset about something.	1	2	3	4	5
23. I explore why I failed and plan for more success the next time.	1	2	3	4	5
24. If I am being accused of something, I decide the best way to deal with it.	1	2	3	4	5
25. I look to see if I did something to create the problem.	1	2	3	4	5

ANGER CONTROL QUESTIONNAIRE

Student: _____ Date: _____

Below is a list of questions about how you act with yourself and others. Answer the questions by how often you do the item in the question.

- Circle 1 if you **never** behave that way.
- Circle 2 if you **seldom** behave that way.
- Circle 3 if you **sometimes** behave that way.
- Circle 4 if you **often** behave that way.
- Circle 5 if you **always** behave that way.

	Never	Seldom	Sometimes	Often	Always
1. I listen when others are talking.	1	2	3	4	5
2. I apologize for my mistakes.	1	2	3	4	5
3. I try to identify my feelings.	1	2	3	4	5
4. I show or tell others how I am feeling.	1	2	3	4	5
5. I try to understand how others are feeling.	1	2	3	4	5
6. I try to understand someone else's angry feelings.	1	2	3	4	5
7. I lose my temper.	1	2	3	4	5
8. I hit or kick other students.	1	2	3	4	5
9. I reward myself by doing or saying nice things when I deserve them	1	2	3	4	5
10. I am able to work out an agreement with other students.	1	2	3	4	5
11. I am able to control my temper when the situation is out of hand.	1	2	3	4	5

Anger Control Program

	Never	Seldom	Sometimes	Often	Always
26. I think through and make choices that I feel will be best.	1	2	3	4	5
27. I am able to keep control when being teased.	1	2	3	4	5
28. I can talk myself out of being angry.	1	2	3	4	5
29. I can calm myself down before I get into trouble.	1	2	3	4	5
30. I find something positive to do when I get angry.	1	2	3	4	5

ANGER EXPRESSION SCALE

Listed below are statements about anger. Please rate yourself on how often you agree with the statement.

	Never	Seldom	Sometimes	Often	Always
1. I control my temper.	1	2	3	4	5
2. I show my anger.	1	2	3	4	5
3. I stop to think and don't get more angry than I already am.	1	2	3	4	5
4. I say mean things.	1	2	3	4	5
5. I do things like slam doors.	1	2	3	4	5
6. I calm down faster than most people.	1	2	3	4	5
7. I tell the person I am angry with to stop making me angry.	1	2	3	4	5
8. I attack whatever it is that makes me angry.	1	2	3	4	5
9. I do something totally different until I calm down.	1	2	3	4	5
10. I try calmly to settle the problem.	1	2	3	4	5
11. I hold my anger inside.	1	2	3	4	5
12. I keep calm.	1	2	3	4	5
13. I get mad inside but don't show it.	1	2	3	4	5
14. I talk to someone until I feel better.	1	2	3	4	5
15. I lose my temper.	1	2	3	4	5

ANGER CONTROL QUESTIONNAIRE

Teacher: _____ Student: _____
 Class: _____ Date: _____

Below are listed skills that are needed in effectively controlling anger. For each student rate how often he or she uses each skill based on behavioral observations in a variety of situations.

- Circle 1 if the student **never** uses the skill.
- Circle 2 if the student **seldom** uses the skill.
- Circle 3 if the student **sometimes** uses the skill.
- Circle 4 if the student **often** uses the skill.
- Circle 5 if the student **always** uses the skill.

A similar questionnaire was designed for the students to complete. Please note that there are a few negatively phrased questions in order to avoid a pattern of responses.

	Never	Seldom	Sometimes	Often	Always
1. Does the student listen when others are talking?	1	2	3	4	5
2. Does the student apologize for mistakes?	1	2	3	4	5
3. Does the student attempt to identify his/her own feelings?	1	2	3	4	5
4. Does the student show or tell others how he/she is feeling?	1	2	3	4	5
5. Does the student try to understand how others are feeling?	1	2	3	4	5
6. Does the student attempt to understand someone else's angry feelings?	1	2	3	4	5

	Never	Seldom	Sometimes	Often	Always
7. How often does the student lose his/her temper?	1	2	3	4	5
8. How often does the student hit or kick other students?	1	2	3	4	5
9. How often does the student reward himself/herself by doing or saying nice things when deserved?	1	2	3	4	5
10. Is the student able to negotiate an agreement with other students?	1	2	3	4	5
11. Is the student able to control his/her temper when the situation is out of hand?	1	2	3	4	5
12. Is the student able to stand up for his/her rights?	1	2	3	4	5
13. How often does the student respond to teasing and name calling by yelling back?	1	2	3	4	5
14. How often does the student walk away from the conflict situations?	1	2	3	4	5
15. How often does the student try to come up with alternatives to fighting?	1	2	3	4	5
17. If another student has a complaint about him/her, does the student try to respond fairly?	1	2	3	4	5
18. When playing games, does the student attempt to compliment others?	1	2	3	4	5

Anger Control Program

	Never	Seldom	Sometimes	Often	Always
19. Does the student do something to feel better about a situation if he/she is feeling left out?	1	2	3	4	5
20. How often does the student throw things when mad?	1	2	3	4	5
21. How often does the student write about how he/she is feeling?	1	2	3	4	5
22. How often does the student seek someone to talk to when he/she is upset about something?	1	2	3	4	5
23. Does the student explore why he/she failed and plan for more success the next time?	1	2	3	4	5
24. If the student is being accused of something, does he/she decide the best way to deal with it?	1	2	3	4	5
25. Does the student look to see if he/she did something to create the problem?	1	2	3	4	5
26. Does the student think through and make choices that he/she feel will be best?	1	2	3	4	5
27. Is the student able to maintain control when being teased?	1	2	3	4	5
28. Is the student able to talk himself/herself out of being angry?	1	2	3	4	5

	Never	Seldom	Sometimes	Often	Always
29. Does the student calm himself/herself down before getting into trouble?	1	2	3	4	5
30. Does the student find something positive to do when getting angry?	1	2	3	4	5

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GENERALIST SPECIAL EDUCATORS OUT OF SCHOOL SOCIAL WORKERS?

Tom Adams and Laura Heitland

ABSTRACT

The authors address the changing role of school social workers who are assigned to serve a school building as a special education team representative. Various advantages and disadvantages to the team representative service delivery model are listed. The vital role of school social workers is reflected clearly in the role as a generalist special education professional.

"It's the parents; they just don't care." This is a common utterance in teacher lounges across the county. School social workers have been able to have an impact on that simplistic and corrosive thinking by being in the right place at the right time.

When 7 full time and 1 part time school social workers are assigned to provide services in 17 school districts in communities ranging in size from 25,000 to 250, a set of issues always will arise in their deployment. Area Education Agency 6 (AEA 6) employs school social workers, school psychologists, special education consultants, work experience coordinators, speech and language pathologists, and other professionals in the special education division to work in local education agency (LEA) buildings. School social workers are employed to serve as team representatives. School psychologists and special education consultants are also employed for that service. Together, with the speech and language pathologists and other professionals, work teams have been developed in order to provide special education support services.

The team representative is a single professional who focuses on the broad set of needs experienced by students who are receiving or in need of special education services. In addition, the team representative plays a vital role in the systematic implementation of data-based problem solving, elimination of certain labels on students, and gradual movement toward less restrictive delivery of special education services. A great deal of variety exists in the way that professionals have adopted the team representative role as well as the level of implementation of the innovations endorsed by AEA 6.

School social workers in AEA 6 have debated the various advantages and disadvantages to the team representative model. They have not necessarily reached consensus. The elementary school counselor mandate, development of at-risk programs across the area, and the initiation of state grant-funded school-based youth services (community agencies located in schools) have meant change for school social workers. Clearly, there has been a scramble among community service agencies to get close to education, where funding was sacred during the reign of austerity of the Eighties and Nineties.

In addition to working as team representatives, school social workers are expected to offer their services "on call" to the buildings served by other team professionals. In turn, school psychologists, special education consultants, and others similarly offer their services to the students in buildings served by the school social worker as the team representative. Typically, school social work services include such activities as brief family therapy, group counseling, parent education, and individual counseling. Under the generalist system some large buildings may end up with as few as one student being served by a school social worker in an entire year. In the same community there are buildings where the same is true about the level of school psychology intervention and assessment. School social workers are helping LEA building teams conduct the business of identification, intervention monitoring, comprehensive evaluation, goal planning, and individualized education planning, with their AEA team available for consultation away from the school site. This also has been true for special education consultants and psychologists in the buildings where they are team representatives.

ADVANTAGES TO THE TEAM REPRESENTATIVE MODEL

1. Better understanding of students is gained by being close to them in their setting. This results in more opportunity to express empathy and provide services within the educational context of student problems.
2. Better relationships with teachers are cultivated as a result of more frequent and intense involvement.
3. Better understanding of the building environment helps to assure valid consultative recommendations.
4. Closer personal relationships that are developed with building staff offer formal and informal convenience in the development of change that is good for students.

5. More participation in formal activities of staff, such as faculty meetings and school improvement action teams, offers a social work perspective to this grass roots change process.
6. Being available more frequently in one setting offers the opportunity to collaborate with other pupil services personnel based in the building. This collaboration improves the services of all involved. School social workers often have more extensive experience and training. The school social worker's understanding of the need to focus services and defer to the primary therapist or intervener can temper the tendency of some to "throw" services in shotgun fashion at student problems.
7. School social work interventions can be more valid with the development of a clearer understanding of academic problems. Student academic difficulties and teacher academic expectations are better understood by school social workers, thus interpreted to parents and the community more effectively.
8. Selected programs receive more intense school social work services as a result of the diminished need to communicate with a wide array of buildings.
9. The inert referrals (trips to the house for ill-defined reasons, at times substituted for meaningful parent contact with teachers) are less frequent.

DISADVANTAGES TO THE TEAM REPRESENTATIVE MODEL

1. School social workers, busy with the broad spectrum of special education support, are not as available to students and their families who could benefit from services.
2. Students in buildings that are not directly served may never see a school social worker.
3. Reliance on other professionals to determine the need appropriately for services in a "foreign discipline" results in no referral at times, when a school social worker could make a real difference.
4. School social workers spend a high percentage of time and energy on activities that are not relevant to their training.

such as administering reading probes to monitor a student's progress. This requires retraining of social workers.

5. Due to the lack of social work visibility in buildings that are not team represented by a social worker, the value of social work interventions are forgotten. Less qualified, less skilled, and less experienced providers may be sought from community or at-risk programs to intervene in problems. Effectiveness of these interventions can be called into question.
6. The multidisciplinary perspective is lost when the team representative handles the work without review of other discipline professionals, and the current team structure requires no consultation when the team representatives sees no need.
7. Some principals, counselors, and teachers no longer have a school social worker available on a routine basis with whom they can consult about the mental health, child welfare, or social service needs of children.
8. Systems-thinking social workers think "parents" at every turn. Other professionals, not systems-oriented, may be less likely to involve appropriate stakeholders and solution agents.

CONCLUSION

Data-based problem solving, elimination of labels, and the development of less restrictive alternatives for delivery of services are all notions that are consistent with the current and historic ethics of social workers. The development of the generalist special education professional has intensified the best ideas and interventions of school social workers where they are assigned as team representatives. The cost is the loss of the discipline to other students and the loss of other disciplinary approaches to students who do have ready access to the social worker. Variations in the application of this model have developed as a result within AEA 6. There is inconsistency and possible lack of equity as a result. Still, social workers have been clearly involved and engaged in serving students as well as critical system level decision making. The vital role of school social workers is not questioned. Rather, how to deploy the limited resource of a few school social workers continues to haunt decision makers.

ABOUT THE AUTHORS

Tom Adams, LISW, holds a BA degree in International Studies (Economics) from the University of Wyoming and a MSW from the University of Nebraska at Omaha. He is lead school social worker at AEA 6. He authored Friends, Friendship and Friendliness, Congregational House, Des Moines, 1992. He is a past president of the Iowa School Social Workers Association.

Laura Heitland, LISW, holds a BSW degree in Social Work from the University of South Dakota and a MSW from the University of Iowa. She is a school social worker at AEA 6. She has recently completed Spanish Language School at Cuernavaca, Mexico. She has been the President of the AEA 6 Employees' Association (NEA).

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BOOK REVIEW

THE PARENT'S GUIDE: SOLUTIONS TO TODAY'S MOST COMMON BEHAVIOR PROBLEMS IN THE HOME.

By Stephen B. McCarney, Ed.D. and Angela M. Bauer, M.Ed.
Hawthorne Educational Services, 1989. 247 pages.

The Parent's Guide is a "heaven send" for service providers looking for that detailed, very specific guide that offers solutions for behavior problems. Stephen McCarney, the primary author, has served as a classroom teacher for students with learning and behavior problems, as a consultant for learning and behavior problems in public schools, and as the Coordinator of the Area of Behavior Disorders at the renowned University of Florida-Gainesville. Ms. Bauer is working as a special education teacher of students with behavior and learning disorders. Together they provide a multitude of ideas on each of 101 common behavior problems seen in the home, at school, and other settings. Therefore, looking at a specific problem, the parent, teacher or other service provider can choose from the many interventions or discipline steps listed under that problem topic to find the interventions that would work best for the child(ren) in consideration. The book is divided into nine general areas of problematic behavior: Difficulty Following Directions and Rules; Irresponsible/Careless; Disrespectful; Social Difficulties; Dishonest; Selfish; Limited Self-Control; Defiant; and Careless with Appearance and Possessions. Examples of specific problems in these categories include the following: eats too much; cannot eat, sleep, or concentrate because of personal or school problems; is easily frustrated; curses; runs; jumps on furniture; cannot deal with friendly teasing; does not put things away; makes excuses; has inappropriate table manners; etc. This guide is very direct and concrete and can be used in a very straightforward way. It is an excellent resource.

Danette Harrington, MSW
AEA 14 Green Valley Social Worker
Creston, IA

BOOK REVIEW

WIN THE WHINING WAR & OTHER SKIRMISHES: A FAMILY PEACE PLAN.

By Cynthia Whitham, MSW

Perspective Publishing, 1991. 198 pages.

Written for everyone involved in the care taking of children ages 2-12, Win the Whining War & Other Skirmishes is a very readable and practical guide to common discipline issues. The author, Cynthia Whitham, gives step-by-step instruction and encouragement to struggling parents and care givers. Specifically, she deals with whining, tantrums, dawdling, bad language, talking back, interrupting, and fighting, among other behaviors. Techniques such as the broken record, time-out, praising, ignoring, offering a choice, proper commands, warnings and consequences, and limit-setting are clearly explained and laid out in an easy-to-follow format. Although the information contained in the book may not be new to school social workers or others in the profession, it does offer a tool to use with parents, or, if appropriate, to allow parents to use by themselves. Cynthia Whitham is a MSW practicing at the UCLA Parent Training Program and has presented this parenting information at many highly attended workshops. Her information is invaluable.

Danette Harrington, MSW

AEA 14 Green Valley Social Worker

Creston, IA

Abusive Dating Relationships Videotape Available

This is a 30-minute videotape with 18 scenes illustrating a range of controlling, emotionally abusive, and physically intimidating behaviors that occur in dating relationships, by both males and females. The accompanying guide has a synopsis of each scene and suggested questions for class discussion. Filmed with student actors from Dubuque, IA high school theater departments.

Send a blank 30-minute tape, padded envelope with \$3.00 postage attached (not \$3.00 for Steve to buy the postage), and \$1.00 for a copy of the discussion guide to Steve Heer, Keystone AEA, 1473 Central, Dubuque, IA 52001.

MANUSCRIPTS WELCOME

Send a typed original manuscript (double-spaced) and 3 copies. Authors are also encouraged to send a 3 1/2 inch hard computer disk. Please attach an abstract of not more than 100 words and a vita of not more than 30 words. The author will retain a copy in case of loss through the mail. Manuscripts will be reviewed by the editors and anonymously by members of the Editorial Board. Authors will receive notification of acceptance. Unless a manuscript is accompanied by a stamped, self-addressed envelope, it cannot be returned to the author. Disks will be returned. Please adhere to the APA (American Psychological Association) publication style. Footnotes should be set at the end of the text. Articles and essays may take the form of research articles, case studies, descriptions of projects, practice techniques, interviews, etc. Notes, double-spaced and typewritten, will be considered. These notes might include viewpoints, practice aids, mini-bibliographies, resource lists, presentations, and letters to the editor. Manuscripts and notes should be addressed to Cheryl McCullagh, The Iowa Journal of School Social Work, P.O. Box 652, Cedar Falls, Iowa 50613-0652.

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Reviews of books or films are encouraged as long as they relate to issues that are significant to social work. Reviews that are submitted for publication should be double-spaced and typewritten. They may be brief in nature or feature more detailed information. Authors are encouraged to send a computer disk as noted above.

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IOWA JOURNAL OF SCHOOL SOCIAL WORK

EDITORIAL COMMENTS

Gary Froyen 3

ARTICLES

Causes of Burnout Among School Social Workers
and Possible Preventive Measures
Jilleen Greene and Michael Raschick 4

Solution Building in the Schools
Elizabeth Walsh 19

VIEWPOINTS

Reflections of an Iowa Freshman Legislator
Representative Ro Foege 32

BOOK AND VIDEO REVIEWS

Day By Day: Raising the Child with Autism/PDD
By Joan F. Goodman and Susan Hobav
Kate McElligatt 47

1-2-3 Magic: Effective Discipline for Children 2-12
By Dr. Thomas Phelan
Kate McElligatt 48

EDITORIAL COMMENTS

As I pass the responsibility of Managing Editor of this Journal to Steve Heer, I want to thank Cheryl McCullagh for her willingness to fulfill the role of Manuscript Editor; it is a role that she has met in an admirably professional and competent manner and a role that, if she had not been persistent, the Journal would have ceased to exist. In turn, I'm sure Cheryl has appreciated the work of all the contributing authors, for as we all must realize, without articles.....there is no Journal.

I have played a small part in the total production of the Iowa Journal of School Social Work—just seeing that the Journal is produced and distributed. This has been a wonderful learning experience, but I am glad to be a social worker and not a managing editor on a full time basis!! Hopefully, I have fulfilled my role to all of you. In other words, if you're supposed to be getting the Journal, I hope you are!!

Cheryl and I appreciate Steve Heer's willingness to assume the editor responsibility for the Journal. Initially, he is assuming the roles of both the manuscript and managing editors. Steve brings writing talent, editing skills, and experience as a published author to the Journal. We wish him the best, and we ask that you give him your support.

Gary Froyen

CAUSES OF BURNOUT AMONG SCHOOL SOCIAL WORKERS AND POSSIBLE PREVENTIVE MEASURES

Jilleen Greene and Michael Raschick

ABSTRACT

This article explores the phenomenon of burnout in school social workers working in a Midwestern city. It specifically looks at what may contribute to burnout and ways that it can be prevented. The article is based on research that used the Maslach Burnout Inventory to measure the degree workers were experiencing depersonalization, emotional exhaustion, and loss of a sense of personal accomplishment. The study looked at possible relationships between various worker variables and their Maslach scores. These variables included worker demographic data as well as measures of their job satisfaction, work duties, and the type and amount of social support they received both on and off the job. Study participants were asked their opinion about the causes of burnout and ways to prevent it. Results indicated that feelings of emotional exhaustion are related to a lack of supervisory support, while a sense of personal accomplishment is a function of overall job satisfaction.

Burnout has been defined as "a state of physical, emotional, and mental exhaustion characterized by 'physical depletion, by feelings of helplessness and hopelessness,...emotional drain, and by the development of negative self-concept and negative attitudes towards work, life and other people'" (Hughes, 1988, p. 24; Pines, Aronson, & Kafry, 1981). It is a "complex, multi-faceted phenomenon reflecting a wide range of factors, including intrapsychic dynamics, satisfaction with work, feelings toward clients, and physical problems" (Blostein, Eldridge, Kilty, & Richardson, 1985, p. 55). The causes of burnout lie, to a significant degree, within workers' environments. Unfortunately the victims of burnout have traditionally been scapegoated for causing it. As Maslach (1977) argues:

All too often people are blamed rather than their work environment...[and] the search for causes is better directed away from the unending cycle of identifying the "bad people" and toward uncovering the operational and structural

characteristics in the "bad" situations where many good people function. (p. 14)

Although previous studies have failed to assess burnout, especially in relationship to school social work, extensive research has focused on other types of social workers. For instance, Oktay (1992), in looking at hospital social workers working with AIDS patients, found that younger workers, those not belonging to a support group, and those with less autonomy, manifested the highest levels of burnout. Among gerontological social workers, Poulin and Walter (1993) found worker autonomy and heightened job stress were the primary predictors of burnout. After studying burnout in rural social workers who were involved primarily in crisis intervention, Hughes (1988) concluded that peer contact, particularly the lack of opportunity to discuss work issues, was the main factor leading to burnout.

RESEARCH INTO THE POSSIBLE CAUSES OF BURNOUT

A basic explanation of burnout is that it is a function of the stress inherent in job activities themselves. In research done in Northern Ireland, field social workers indicated that the most significant cause of burnout for them was the lack of a sense of personal accomplishment in their jobs. Two other factors were cited as often contributing to moderate or high levels of stress: "experiencing too little time to perform [job] duties to...[their] satisfaction" and the "rationing of scarce services or resources" in their organizations (Gibson, McGrath, & Reid, 1989).

Burnout has been specifically related to stressful organizational work structures. Arches (1991), for instance, concluded that the social workers she studied were most satisfied with their jobs when they "have autonomy, are not limited by demands of funding sources, and are not stifled by bureaucracy" (p. 206). She stressed that the nature of the work place, especially bureaucratic structures, can negatively impact workers and that burnout should not be attributed primarily to individuals' personality characteristics.

Some researchers have looked at the relationship between workers' "role conflict" and burnout. In their study of burnout in school psychologists, Pierson-Hubeny and Archambault (1987) found that role conflict--defined as the lack of compatibility and congruency of the requirements of role--was a significant predictor of burnout. This was especially true in the dimensions of emotional exhaustion and

depersonalization, as measured by the Maslach Burnout Inventory. The authors contended that role conflict is less pronounced in teachers than in school psychologists, social workers, or guidance workers and speculated that this was because teachers are more directly involved in the primary mission of schools, classroom instruction.

In contrast, Jones (1993), in her study of child welfare administrators, found that "role conflict" could actually reduce job stress. That is, administrators who were experiencing role conflict had developed positive ways of coping with the high stress levels of their job and, in fact, seemed to be energized by their work. Jones believes that having multiple, sometimes competing, role demands can help workers become more open to receiving varied kinds of information, including different points of view, and to generally show greater flexibility in their job.

Much work has focused on how the type and/or degree of social support workers receive might affect burnout. For instance, Koeske and Koeske (1989) found that a demanding workload, by itself, did not increase the level of burnout in social workers. However, when this was combined with a low degree of social support, especially from coworkers, burnout worsened. Melamed, Kushnir, and Meir (1991) studied the effects of work demands, self-perceived control over work, and social support on the levels of burnout and job satisfaction. They found that high perceived control and social support were associated with reduced burnout and increased job satisfaction.

Himle, Jayaratne, and Thyness' study of Norwegian social workers assessed the relative impacts of four different types of social support on burnout. They found that informational support (defined as getting needed information from coworkers or supervisors) and instrumental support (receiving help with difficult tasks from coworkers or supervisors) were more effective in alleviating burnout than emotional or approval support (having warm, friendly coworkers or supervisors, and getting their approval for doing things well). They hypothesized that informational and instrumental support buffer the effects of burnout by increasing workers' sense of competency and control over their jobs (Himle, Jayaratne, & Thyness, 1991).

Consistent with Himle et al. (1991), Jayaratne and Chess (1986) found, in their study of married, female child welfare workers in the Midwest, that emotional support was not as powerful in reducing burnout as was expected. A more powerful factor was workers' feelings of work competency.

CONTEXT OF CURRENT STUDY

This study was initiated when one of the authors was completing her MSW field placement at a primary level, public school setting. In exploring possible topics for her graduate research project, her agency field supervisor suggested looking at the phenomenon of job stress and possible burnout among school social workers. He thought that school social workers might be particularly susceptible to burnout because of their structural isolation in most school settings, i.e., they usually work "alone" in schools without day-to-day contact with other school social workers. This ultimately led one of the authors to focus her graduate research on assessing the extent, causes, and potential preventatives of burnout among social workers in the school district at which she was placed.

RESEARCH QUESTIONS

The primary research question addressed in this exploratory case study was: What factors in a school social worker's environment are associated with burnout, either contributing to it or preventing it? The factors that were assessed were as follows: a) demographic characteristics of study participants; b) their overall levels of job satisfaction; c) the types of work activities in which they were involved; d) the kinds of client problems they dealt with; and e) the types of social support most meaningful to them. In the process of addressing the primary research question, the study also evaluated respondents' overall levels of burnout as measured by each of the three subscales of the Maslach Burnout Inventory, *Emotional Exhaustion*, *Depersonalization*, and *Personal Accomplishment*.

POPULATION AND SAMPLE

The population consisted of the 23 school social workers working in a Midwestern public school system. Eighteen of the 23 returned mailed surveys, for a 78% response rate. Twelve respondents were female, and six were male. Twenty-two % of respondents were

39 years of age or younger. The largest proportion, 44.4%, were 40-49 year olds, and 33% were 50-59 year olds. Although there was a wide distribution, the modal length of respondents' school social work experience was 15-19 years (with this comprising 41.2% of the sample).

RESEARCH DESIGN AND PROCEDURES

The mailed survey consisted of a copy of the 22 question Maslach Burnout Inventory (MBI) and a questionnaire containing both quantitative and qualitative components. The MBI does not provide an overall score, but instead rates respondents on three separate dimensions of burnout: emotional exhaustion or "feelings of being emotionally overextended and exhausted by one's work"; depersonalization, defined as "an unfeeling and impersonal response toward recipients of one's services, care, treatment, or instruction"; and personal accomplishment, involving "feelings of competence and successful achievement in one's work with people" (Maslach & Jackson, 1981, p.2). Heeding the advice of Maslach and Jackson (1981), the MBI was described to study participants as a "survey of job-related attitudes" (as opposed to "a measure of burnout") in order to avoid their possibly biasing sensitivity to being questioned about burnout per se. The MBI has been used extensively in burnout research and has proven high reliability and validity (Blostein, Eldridge, Kilty, & Richardson, 1985; Byrne, 1991; Himle, Jayaratne, & Thyness, 1991; Jayaratne & Chess, 1986; Oktay, 1992; Pierson-Hubeny & Archambault, 1987; Poulin & Walter, 1993).

The independent variables involved possible causes and preventions of burnout. They were assessed through both quantitative and qualitative questions. Job satisfaction was quantitatively operationalized by having respondents rate their overall degree of job satisfaction on a 7-point scale, from "maximum dissatisfaction" to "maximum satisfaction."

Participants were provided with a list of specific types of job activities associated with school social work. They were asked to rank the three on which they spend the most time. The eight listed activities included time spent with individual students, on paperwork, in phone contacts, and in consultation with other staff. Participants also were asked to estimate the percentages of their caseloads living in homes characterized by different potential types of stressors. These stressors

included low income, parental chemical abuse, "violence," and homelessness.

Social support was quantitatively assessed by asking respondents to rank, on a 7-point scale, the relative importance of support they received from various individuals or groups. The eight choices included their spouses or significant others, other social workers, and various other school professionals. Demographic variables included gender, age, and years of school social work experience.

The qualitative section of the survey consisted of three open-ended questions: "When you do experience feelings of burnout, what three factors do you feel have most significantly contributed to these feelings?"; "What three factors do you feel are most helpful in preventing your feelings of burnout?"; and "If you could implement one thing to help alleviate feelings of burnout among school social workers like yourself, what would that one thing be?"

DATA ANALYSIS

Pearson's r was used to assess the relationships between each of the MBI subscale scores (which served as the study's dependent variables) and a) the proportions of respondents' caseloads exposed to different types of stressors in their home environments, b) the importance ascribed by respondents to particular kinds of social support, and c) respondents' overall levels of job satisfaction. ANOVA's were conducted to evaluate the relationship between MBI subscales and a) the amount of time that respondents devoted to different types of work activities, b) respondents' ages, and c) respondents' years of school social work experience. T-tests assessed the relationship between MBI subscales and gender.

Responses to the open-ended questions were qualitatively analyzed by creating response categories on the basis of all the topical areas found to be included in the responses (with this requiring multiple readings of all responses and ongoing "reclassification"); counting the number of responses in each category; and selecting particularly explanatory responses to quote in the final report.

RESULTS

Quantitative Results

The scores on the three subscales of the MBI--along with what are considered "low", "middle", and "high" score-ranges--are summarized in Table 1. These data indicate that respondents were in the high end of the moderate range in respect to *emotional exhaustion*; the high end of the low range in the *depersonalization* dimension; and in the low end of the low range regarding *personal accomplishment* (which reflects a high degree of burnout).

Table 1
Normative Ranges of Maslach Burnout Inventory
Compared with Survey Results

	"Low" Range*	"Middle" Range	"High" Range	Respon- -dents' Mean Scores	Resp.' Median Scores	Standard Deviations of Resp.' Scores
Emotional Exhaustion	0-16	17-26	27 or over	23.9	22.5	10.18
Depersonal- ization	0-6	7-12	13 or over	5.6	4.0	4.87
Personal Accomplish- ment	39 or over	32-38	0-31	40.6	41.5	5.50

*The low, middle, and high ranges represent norms based on the results of over 10,000 MBI's (Maslach & Jackson, 1981, p. 3).

No statistically significant relationship existed between any of the three Maslach dimensions of burnout and either age or years of school social work experience (as assessed through ANOVA's), nor between scores on the burnout dimensions and gender (as determined by t-tests).

On a 7-point scale (with 7 representing "maximum satisfaction"), the mean level of respondents' job satisfaction was 4.82; the median was 5.00; and the standard deviation was 2.00. While no statistically significant correlation was found between job satisfaction and either emotional exhaustion or depersonalization, the relationship between job satisfaction and personal accomplishment was significant in the expected direction ($r = 0.66$, $p < .05$). This is consistent with the findings of both Gibson, McGrath, and Reid (1989) and Koeske and Koeske (1989).

Table 2 shows how respondents rated the importance of eight types of social support listed on the survey and four others provided by respondents themselves.

Table 2
Respondents' Ratings of Importance of
Different Kinds of Social Support

Sources of Support	Mean Ratings (on a 7-Point Scale, with 7 Reflecting "Maximum Importance")	Standard Deviations
Spouse or Signif. Other (N=16)	6.0	1.25
Other Family Member (N=15)	4.6	1.93
Other School Social Worker (N=16)	4.9	1.36
Teachers in Your School (N=18)	5.3	1.33
Other School Staff (N=17)	5.8	1.52
Your Supervisor (N=16)	5.5	2.12
Students in Your School(s) (N=17)	4.1	2.03
Your Friends Outside of Work (N=18)	5.1	1.72
Other: Community Liaison (N=1)	7.0	0
Other: Parents (N=2)	6.5	.50
Other: Interns (N=1)	6.0	0
Other: Professionals Outside School (N=1)	6.0	0

Person's r was calculated for each of the 13 types of social support in relation to scores on each of the three Maslach dimensions of burnout. A statistically significant relationship was found between support from one's supervisor and respondents' MBI emotional exhaustion scores ($r = -.51$, $p < .05$). This supports earlier findings of Himle, Jayaratne, and Thyness (1991). It is somewhat unclear, however, to whom respondents were referring when they answered the question about supervisory support since, in their school district, social workers did not have formalized professional and/or peer supervision. The only institutionalized form of "supervision" consisted of consultation about policy issues, on an as-needed basis, with a non-social work administrator. Some respondents also may have been getting outside clinical supervision in order to meet state requirements for licensure,

but this is something for which they would have had to contract privately.

ANOVA analyses were done to determine whether there were associations between types of work activities that respondents indicated consumed "the largest amount of work time" and their scores on any of the MBI subscales (the five factors in these analyses were the activities that one or more respondents identified as consuming the "largest amount of work"). There were no statistically significant relationships. Table 3 summarizes respondents' answers to this survey question eliciting this data.

Table 3
Rankings of Relative Amounts of Time Spent in Various Activities

Activity	Number of Respondents Ranking This as "Consuming <i>Largest Amount</i> of Work Time"	Number of Respondents Ranking This as "Consuming <i>Second Largest Amount</i> of Work Time"	Number of Respondents Ranking This as "Consuming <i>Third Largest Amount</i> of Work Time"
Consultation with, and/or Support to, Staff	4	5	1
Meeting with Parents	1	0	5
All Other Meetings	1	1	5
Individual Time with Students	2	7	3
Time with Students in Groups	6	2	0
Paperwork	4	2	2
Phone Contracts	0	0	1
Planning Time	0	1	1

Person's r was used to test for possible associations between home environmental stressors affecting students/clients and respondents' MBI subscale scores. No statistically significant relationships were found. The mean percentages for each response category are listed in Table 4.

Table 4
Percentages of Student Clients Characterized by Potentially Stressful Environmental Factors

Environmental Factors Characterizing Students	Respondent Estimates of Percentages of their Students Exposed to Selected Environmental Stressors	
	<i>Means</i>	<i>Medians</i>
Homelessness	9.25	3.75
Low Income	71.40	75.00
Minority Issues	19.06	20.00
Parental Alcohol or Drug Problems	33.67	30.00
Single Parent Families	57.0	50.00
Violence	37.65	30.00

QUALITATIVE RESULTS

Factors Contributing to Burnout

The first open-ended question asked respondents for the factors that they felt most significantly contributed to feelings of burnout. There were a total of 50 responses provided by 17 respondents. Seven of the 50 related to *staff/coworker interactions*, with references to such things as "personal conflicts with another staff," "negative attitudes of staff," and "feelings that other staff are not doing enough." There were six responses in each of two other categories, identified by *amount of workload* and *direct work with clients*. The former included comments like "too much to do in too little time." In relation to client stresses, respondents indicated such things as being "unable to break through to dysfunctional families," having "cases that seem hopeless," and being faced with "the enormity of problems presented by students." Categories consisting of 4 responses each were *inadequate time*, *excessive paperwork*, and *low job satisfaction*. There were 3 responses indicating feelings of *lack of support* (e.g., "inadequate support from supervisor" and "not having a supportive, understanding, and accepting person available to talk to"). Three other responses referred to *administrative issues* (e.g., "lack of direction/support from administration," and "it would be nice to know administration...appreciates what we're doing as school social workers").

Factors Preventing Burnout

The second open-ended question asked respondents for the factors that they felt were most important in preventing burnout. There were 49 answers from 17 respondents. Nine mentioned *social support*. These included an emphasis on the importance of "talking to an accepting, supportive person," and having "strong relationships with colleagues I respect." Six responses related to *self-care*--for instance, getting "rest, exercise, and [having] fun on off-hours"; participating in "prevention groups"; and following the "12-step philosophy." *Working as a team* was mentioned 5 times. One comment in this category talked about the importance of "working in a building where staff has a team philosophy," and another stressed "team support and sharing of responsibilities."

Ways to Alleviate Burnout

Sixteen respondents provided a total of 21 suggestions regarding changes that schools could implement in order to reduce the potential for social worker burnout. Seven of the 21 recommendations were related to *providing more support* in the work environment, either on an individual or group basis. Some of these comments called for systematically organized support group meetings. Others emphasized the general need for greater sharing of materials, ideas, and/or experiences with other school personnel. One respondent suggested networking with community social workers and incorporating these individuals into school-community support groups. Three respondents cited *reducing paperwork* as a way of alleviating burnout, and two others recommended *reducing workloads* generally. *Increasing work schedule flexibility* was also suggested twice (one calling for a two-hour exercise break during the day and another for periodic "leaves of absence").

DISCUSSION AND RECOMMENDATIONS

The social workers surveyed in this study seemed to be experiencing a substantive degree of burnout. While the MBI scores suggested a low degree of *depersonalization*, their results on the *personal accomplishment* subscale reflected a high degree of burnout in this dimension, and their *emotional exhaustion* scores were in the high-moderate range. Although these results are no cause for alarm,

the potentially high costs of burnout--to workers and, ultimately, to clients themselves--warrant some concern.

This research also suggests ways of alleviating burnout in schools. One particularly strong theme--evident in both the qualitative and quantitative results--is the need to increase the types and amounts of social support for school social workers. They may have greater needs for social support than many other types of social workers since they frequently have little contact with other social workers, and--if this study's results are generalizable--their contacts with other school personnel may often *exacerbate*, instead of alleviate, burnout.

On the basis of this study's results, school districts might consider increasing the range of contacts between social workers assigned to different schools. This could include facilitating the formation of informal alliances, partnerships, and/or mentorships between individual social workers. It could also include establishing formal meetings--involving either all social workers or else subgroups with common interests in respect to client age groups and/or types of children's issues. A variation of this would be to formally designate a number of more experienced social workers in a district as supervisory consultants for perhaps 5-6 other social workers. To make the latter workable would, of course, require that these "senior consultants" be provided some release time from their normal school social work responsibilities.

School districts might also assess issues of realistic workloads for all social workers, both in terms of expected *quantity* and *type* of activities. In respect to the latter, alleviating some of paperwork requirements might not only directly decrease stress, but, by allowing workers to focus more on direct work with clients, it might lead to a greater sense of job satisfaction, thus providing an important buffer against burnout.

CONCLUSION

The research results discussed in this article suggest that school social workers who experience feelings of personal accomplishment from their work may be less likely to suffer from feelings of burnout. Furthermore, respondents who emphasized the importance of support they received from their supervisors were found to have low levels of emotional exhaustion, which is one central dimension of burnout. Other factors, such as potentially stressful home

environments of students and time workers spent on various job activities, were not found to be significantly related to burnout.

When asked what they felt contributes to feelings of burnout, respondents cited such factors as interactions with other staff, workload pressures and time constraints, stresses related to direct client contact, and paperwork. The factors they felt were helpful in preventing burnout included support from others, self-care measures, and teamwork. In response to what they would like to see implemented to help prevent burnout, one-third indicated having regular support meetings. Other ideas included reducing their paperwork and their overall workloads and providing them with more flexible work schedules.

Respondents emphasized that social support was an important preventive factor in relationship to burnout. This is reflected by the statistically significant inverse association between supervisory support and emotional exhaustion, respondents' listing of lack of support as a key cause of burnout, the high percentage of responses indicating that support helps prevent burnout, and, finally, by the even larger percentage of responses indicating the need for support groups within the school district. It appears that the caregivers participating in this study were asking for some well-deserved care for themselves. School districts should respect this important message by first carefully listening to their social workers and then creatively exploring ways to provide them with positive work environments.

FOLLOW-UP AND SUGGESTIONS FOR FURTHER RESEARCH

After this study was completed, the results were distributed to all respondents as well as the district's Director of Special Education. No policy changes were made, however, on the basis of the results. This is probably typical of much research in the social sciences, and it points to the need to make *implementation* an integral part of the research process. Thus, if others replicate this study, they would do well to integrally involve both line workers and administrative personnel at the front-end of the project, and--from that point on--place some emphasis on how to translate research findings into meaningful policy changes. Another suggestion for future research is to assess what types of supervisory arrangements might be most important to social workers. In this study, supervisory support seemed to be an

important preventative against burnout; however, it was unclear about what models of supervision would be most useful. Research could also look at possible differences in the incidence of burnout between school social workers working exclusively in special education classrooms and those also involved with mainstreamed classes. Another possible variable affecting stress and burnout is the extent to which social workers are able to get involved in preventive, versus just "crisis-intervention" efforts. Finally, it is important to learn more about how social workers are affected when school resources are reduced and workers have larger, more stressful caseloads.

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ABOUT THE AUTHORS

Jilleen Greene, the study's principal investigator, is an elementary school social worker for the Albany (MN) School District. Dr. Raschick is an Assistant Professor at the University of Minnesota, Duluth, Department of Social Work. The authors wish to thank Jay Wolterstorff, School Social Worker, and Joyce Kramer, Professor of Social Work, for their consultation and guidance.

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SOLUTION BUILDING IN THE SCHOOLS

Elizabeth Walsh

ABSTRACT

This article describes the application of the solution-focused model of intervention, which was developed by Steve deShazer and Insoo Kim Berg, to working with children, families, and professional teams in the schools. The direct advantage of implementing the model is explored as it applies to school social work.

Solution-focused work with children is drawing attention from teachers, counselors, and social workers in the struggle to stay positive in a problem-centered world and to make the best of limited time with children. School social workers are often the schools' pragmatic optimists. We look for ways to make meetings more meaningful and useful and paperwork to reflect actually what is useful and also the school social work role. School social workers desire to better the lives of children and their families.

Solution work first found its home in the therapy world. Originally, it was developed by Steve deShazer (1994) and Insoo Kim Berg and Scott Miller (1992). The assumption is that when people broaden their scope and see other possibilities for solutions, they can change in a direction that creates positive change for them. As persons discover new solutions, they become empowered and energized. They often see solutions for other areas of their lives. Small change can lead to greater change. The student who begins to feel successful in making friends often becomes more self-confident academically or goes on to have more positive interactions at home with family.

All problems have solutions. One often can arrive at solutions by asking about exceptions to the problem. If there were not exceptions to a problem, it would not be a problem, rather it would be "the way things are" and not a problem. Students and teachers can identify solutions through mutual cooperation.

Two concepts of solution-focused theory remain controversial in both therapy and education. The first is that one does not need to know a great deal about the problem in order to find a solution. This, of course, flies in the face of behaviorists in both fields that concentrate

on the antecedent and precedent to the problem in order to resolve it. Solution-focused theorists would say that the same analysis should be applied to the solution in order to identify behaviors that will resolve the problem.

People who have spent many years developing an expertise in this area are often the first to challenge this model as "happy talk" that does not deal with the problem and, therefore, cannot be effective. School social workers often try to discourage parents and teachers from getting mired down in the "whys" of a problem. "Why?" often gets one nowhere. The other concept, which certainly is not new to the social work profession but does not mesh with much of education theory, is that clients have the expertise and the resources to solve their own problems. Social workers do not superimpose their experience and knowledge in order to reach a solution. People who use the solution-focused model concentrate on cooperating with the client, knowing that the solution that works will be the one that comes from the client.

SOLUTION-FOCUSED INTERVENTION GUIDELINES

Steve deShazer (1992) offers the following guidelines, which appear simple but are often forgotten:

"If it ain't broke, don't fix it." Many clients have already started on a solution and simply need encouragement.

"If it works, do more it it."

"If it doesn't work, do something different."

Hopefully, the interventionist does not make the same mistake as the clients who are stuck because they keep trying the same solutions that do not work. Also, it is hoped that interventionists do not need some fancy solution when positive change has already started to occur.

Other guiding concepts of this model dictate that one should be brief in working with the client population. Children and adolescents are changing so quickly that often the situation also can be resolved quickly. It is necessary to focus on the present rather than the past and on actions rather than insights. "Why?" is often a time-consuming direction that gets us nowhere.

School social workers who use this model in working with parents and teachers will attest to the experience that cooperation is inevitable. Learning to cooperate with the client base is essential to this model. There is no such thing as resistance, according to deShazer (1989). What people in other models call resistance is to a solution-based social worker merely useful information. It is information that tells another way to cooperate with the client. This becomes particularly useful in teacher consultation.

Cooperation is evident in each of the five steps that form a guideline in using this model. The first step is to *form a cooperative relationship*. If one assumes that the client is the expert and conveys that expectation, cooperation happens. This, of course, is not a new concept to school social workers, but it is a reminder not to get caught up in power brokering. By passing over the problem and moving directly toward the solution, one is able to bypass many opportunities for conflict. Most importantly, the clients have to initiate movement, and the school social worker helps them to do that through skillful use of questions.

Mandated clients present a different type of challenge. Mandated clients probably make up a large percentage of a school social worker's caseload. How many counseling sessions begin with a teacher dragging a student into the school social worker's office? How many home visits take place due to a problem directly identified by the school, which may or may not be a problem to the parents? How many students end up on a social worker's roster? Cooperation is often gained by acknowledging who is identifying the problem, which usually and eventually becomes a problem to the client. Discussing ways to get out from under the problem that someone else has identified often provides a basis for cooperation. Helping parents figure out how to avoid phone calls from the teacher or helping a student figure out how to get recesses back is cooperation.

Second, *help the client develop a picture of the solution*. By asking what is going on when the problem is not happening and what is happening instead, one begins to help the client develop the picture. Once the picture is beginning to take shape, the who, what, when, and where questions will help fill in the details.

Third, *help the client negotiate goals*—the steps toward the picture of the solution. It is most important that these goals are small and do-able by the client. They must come from the client and reflect the client's view of change. Goals should describe the start of something. It is much easier for a student to hold a koosh ball than to stop tapping his/her pencil on the desk. Goals should be perceived by the client as hard work. The client will take the work seriously and

have more pride when goals are accomplished. Goals should be described in concrete, behavioral terms.

Fourth, *make a maintenance plan*. What does a client need to maintain the identified goals? Often, it is a case of defining significant others who will notice and help the client stay on track. Parents may attach privileges to maintaining certain behaviors. Teachers may identify a certain sign (cue) to the student to positively reinforce a behavior. By establishing a maintenance plan, a client's self-confidence is increased, and solutions are seen as "the way things are" rather than an exception.

Fifth, *review the progress*. As a follow up with clients, one needs to ask all about solutions and how that has made a difference to the client. What is better? What has worked? How have you done that? One solution often leads to other positive changes, which, when discussed, increase in importance. The student that is completing more homework may have joined a club at school and increased his/her positive contacts with peers and teachers. She may also tell about positive interactions with family at home, possibly due to feelings of success.

Question tools are used to implement the model. Questions help clients to look at possibilities for solutions that they have not considered. The respect with which these questions are asked and the assumption of client competence create an atmosphere in which clients again confidence to try new solutions. The interview that follows exemplifies such questions.

Case Description

Eight year old Ann is referred by her teacher due to withdrawal from peers. Her teacher states that she appears more irritable. She cries when she gets poor grades on papers, and her grades have begun to drop recently. She also is not participating in class as much as she once did. Her teacher also states that when her mother came in for the last conference, she told the teacher that she is separating from Anne's father.

School social worker: So, Anne, tell me what we can talk about today that will tell you that it was helpful to come and talk with me?

Anne: I don't know. Mrs. Murphy just told me to come.

School social worker: So, I guess Mrs. Murphy is responsible for us having this special time together. What do you suppose she would say she would like us to do today?

Anne: I don't know.

School social worker: I don't know either. Well, that's a mystery we can solve when we ask Mrs. Murphy. Until then, as long as we're here, is there anything you can think of to talk about that could be helpful to you today in school?

Anne: I don't want to go out to recess today. All my friends are mad at me.

School social worker: That sounds tough. How did you get through recess this morning?

Anne: I played with a few younger kids. They don't seem to mind if I get crabby.

School social worker: Is that what keeps you from your friends?

Anne: Yeah...I don't mean to, but sometimes I feel so mad. But, I'm really not mad at them.

School social worker: I wonder how you could let them know?

Anne: I don't know.

School social worker: When do things go best with your friends?

Anne: When we use my jump rope and I'm better about taking turns. Maybe I can offer them the rope and tell them I feel better.

School social worker: Do you think that could happen next recess?

Anne: I think so....

School social worker: Anne, if we had a ruler and were going to measure how sure you are that you could do this...I is not

very sure...and 10 is you're sure you can do this...where would you put yourself now?

Anne: Probably a 7.

School social worker: Is a 7 sure enough to make it happen?

Anne: Yeah.

In this interview, we move quickly through the initial steps of the model. The cooperation with Anne, even though she has no idea why she was referred, helps set the stage for building a picture and identifying concrete and very specific goals. Often this happens rapidly with children. Certain questions were asked to determine how confident Anne was that she could meet this goal. This interview was short and moved rapidly to an action plan. When working with children, this is often the case. Brief and action-oriented intervention is effective. If Anne believes that small change can lead to larger change, Anne may have a good start in feeling more successful in school. Perhaps this will strengthen her ability to deal with her parents' separation. Certainly, other models of counseling may have started with encouraging her to talk about her feelings. It is the solution theorists' contention that starting at the point of Anne's feelings about her parents' separation would further emphasize the problem and move Anne farther away from feeling that she can do something to help herself in the here and now.

QUESTION TOOLS

Several of the question tools were utilized in the above interview. *Exception questions* are used to help clients figure out when the problem isn't happening. The question, "When do things go best with your friends?" is designed to help Anne figure out what she needs to do so that her friends won't be angry at her. She identifies sharing her jump rope and remembering to take turns. Those are two positive actions that she may take. Many school social workers who use this model begin exception questions with, "Are there times when?".... This may refer to.... "When Johnny isn't hitting you?...When your friends decide to sit with you?...When you do get your homework done?..." Or, if one is utilizing this in teacher consultation, one may

ask, "Are there times when Johnny makes eye contact or seems to listen better?"

Coping questions are respectful questions that put the client in touch with skills the client is already using. In the interview with Anne, the school social worker asks, "That sounds tough; how did you get through recess this morning?" Anne then identifies the fact that she occupied herself by playing with younger children, who are more tolerant. With adults the question may simply be, "How do you cope?" These questions are often used with children and their families who have lost a family member in death, divorce, or have suffered the trauma of sexual abuse. The questions also may be useful with children and adults who are depressed. Usually, even the most severely depressed person is actively coping in some way. Coping may be in such small steps as getting dressed and going out the door or eating breakfast. Coping questions are never disrespectful when used in even the most tragic situations, and they enable the school social worker to connect and be as helpful as possible.

Relationship questions particularly help clients specify behaviorally-anchored goals. In the interview with Anne, the school social worker asks, "What do you suppose Mrs. Murphy would say she would like us to do today?" In this particular instance, Anne is able to clarify that she really doesn't know; however, this question often leads students to tell what they think the concerns are, thereby enabling the school social worker to move on to other relationship questions that may lead to positive goals. "How would Mrs. Murphy know that you were beginning to feel better in class?" or "What would Mrs. Murphy see at recess that would tell her that you were getting along better with your friends?" are good attempts to move to specific descriptions of positive goals. These questions are also very effective to use when working with students and their families. Questions such as, "How would your mom and dad know that you were trying harder to get along?", are often helpful in diffusing conflict and facilitating positive movement. It is important to be respectful of the difficult shifts in thinking that people go through in order to answer relationship questions. Not only do persons have to shift from problem identification to solution thinking, they also have to put themselves in someone's place to figure out how others might be thinking. This takes time and thought, and people may need more time to respond.

Scaling questions help clients think about where they are in terms of reaching goals. The most widely-used scaling question is, "If 1 is the worst thing with this problem and 10 is the problem that is solved, where would you put yourself today?" The follow-up question that is useful is, "What would get you to a 6 (if the client says 5)?" In

the case of Anne, the school social worker used the concept of a ruler to help Anne assess the possibility that she could do what she wanted to do. Scaling can also be used to scale confidence, willingness, and self-control. In teacher consultation, it may be used to scale usefulness and confidence when identifying a new strategy to try in the classroom. Scaling is also a good way of validating one's assessment of whether goals are do-able.

The solutions-focused model is perhaps best known for the *miracle question*. This question is no different than questions that school social workers have been asking for years. Often students are asked by counselors and school social workers about their three wishes. The miracle question was first spoken as a response to deShazer (1994), who was interviewing a client about goals. The client responded, "I don't know; it would have to be a miracle," to which deShazer responded, "Tell me about your miracle."

The *miracle question* is designed to help clients move toward goal setting. The traditional question is, "Suppose you leave here and go home and at bedtime go to sleep, and suppose that while you are sleeping a miracle happens. The miracle is that all the problems that brought you here are solved. But, you are sound asleep and have no idea that this miracle happened. When you wake up in the morning, what will tell that this miracle has happened?"

Children and adolescents often have creative answers. Within the context of the setting created by this question, one may ask relationship questions. "What will your mother notice about you on this miracle morning?" "What will you notice about your mother on this miracle morning?" Often, it takes some skill on the part of the interviewer to continue with the theme and to help create a picture of the solution. The miracle is designed to be an efficient way to put the client in touch with goals. There are many ways to get there; the miracle question is one of many.

The *miracle question* also is often a good way to diffuse conflict. Clients cannot remain angry and problem-focused while thinking about how to answer the question. Often, there is an attempt to move back to the negative, because that is the long-term pattern, but if a school social worker can bring clients back to the question, clients cannot stay in "problem talk." The directions are exactly opposite. When parents and students are actively fighting, for example, the *miracle question* can help them leave the negative and move on.

Another useful question is one that is brought up in the morning of the initial interview with clients. It deals with *pre-session change*. Often, by the time a referral for special education evaluation is signed by the parent and teacher, there has been some effort to solve

the problem. These efforts can be important clues to the client's eventual success. Because change can happen fast, a school social worker must be prepared to acknowledge that a solution may already be reached. We often jokingly used to call this the "miracle cure." Many times the school social worker may be given the credit. This situation may be an opportunity to move quickly to the fourth and fifth steps of the model, that is, to discuss how the client will maintain the progress. It is often helpful to set up a follow-up to review progress. This creates a more lasting positive connection between the school social worker and the student or family and may carry over to the school.

APPLICATIONS TO THE SCHOOL SETTING

This model may be used in many creative ways to bring about solutions in the school setting. For most school social workers time management is critical. Gathering information is often the most time consuming task. Working around teachers' schedules so that they are available to update the school social worker as well as express their concerns is often a complex task. Often, school social workers rely on written information that is placed in teachers' mailboxes. If one can bypass all of the specific details of the problem and ask teachers to describe "when you notice things go better" for this student, most of the information regarding positive goals needed to address the problem is already in place for whatever meeting needs to take place. The same forms that go to the teachers also can go to the parents and student. This is particularly useful in child study team meetings where broader concerns can be discussed briefly and broader solutions can be developed.

Teacher consultation is an important part of the social work role. In reality, teachers are our clients as much as students. Teachers are part of most solutions, which involve classroom behavior and home-school communication. The use of this model in teacher consultation is fairly straightforward. Establishing a cooperative relationship means conveying respect for skills and competence as well as the hard work that the teacher is already doing. Teachers who do not feel a level of cooperation tend to let school social workers know by telling them that they over simplify the problem, and often they will conclude that recommendations will not work. This should be useful

information that a cooperative relationship has not been formed. Only by feeling understood will teachers be able to move on to solutions.

By asking the useful questions a school social worker will help the teacher move to a picture of the solution and develop small doable goals to reach the solution. The *miracle or exception questions* often help the teacher orient toward solutions. *Scaling questions* are useful to determine whether the teacher believes the plan is doable. It also may be used as a baseline to find out how big a problem that is to the teacher and also used later to determine the teacher's view of whether the plan has been successful. *Relationship questions* often are helpful in helping the teacher give positive reinforcement for behavior change, for example, "How will Johnny know that you notice?" *Relationship questions* assist in finding out who is most invested in the solution (Who will be the first to notice this change?).

Two distinct advantages make this model particularly amenable to school social work. The first is that the interventions are often brief. The second is that it is not necessary to have everyone involved with the problem and solution present in order to determine some action toward solutions. A school social worker may work with a student who has a problem identified by parents and teacher and help the student develop a solution. At that point the teacher and parents may be asked to watch for change. This enables the school social worker to move ahead instead of setting up an elaborate conference with too many people. All those who are involved with the problem do not need to be present in order to identify a solution and establish goals.*

SCHOOL SOCIAL WORKER - CLIENT RELATIONSHIPS

It is important to note that the motivation to find solutions is connected closely to the type of relationship that the social worker has with the client. Some clients may only want the school social worker to listen to problems and are not interested in solution building. In the

* For more specific details regarding individual counseling, an excellent resource is Gerald Sklare's book Brief Counseling That Works, A Solution Focused Approach for School Counselors. It is listed in the references.

therapy community this relationship is referred to as a *complainant relationship*. People who seek this kind of relationship will not attend to any of the useful questions that a school social worker asks. After attempting to open up many other possibilities through the use of questions, the school social worker may begin listening in order to cooperate with the client. It is important to remember that when one encounters this situation, it is not reflective of a school social worker's skill but a type of relationship that leaves no option but to cooperate and listen.

At times the social worker may encounter people who listen to what the school social worker says but show little interest in taking action to find the solution. This relationship is called a *visitor*. Visitors are often listening and trying to decide what looks possible in terms of solutions. Visitors are very polite and often attentive but remain vague in describing solutions and goals even with the most skilled interviewer.

The *customer* involves a client who is ready to work. This customer is convinced that the problem is solvable and solutions are close at hand. When working with this customer, be prepared to move fairly rapidly in goal setting.

It is important to note that a client may begin the session as a complainant, move to a visitor relationship, and end up in a customer relationship. Knowledge about these relationships helps school social workers avoid feeling ineffectual and provides a framework in which one can avoid being judgmental. It is simply not useful to view the social worker-client relationship as incompetent nor clients as uncooperative. That mires us in the "whys" of problem talk and gets us nowhere.

School social workers need to find ways to be optimistic and pragmatic. In keeping with the social work code of professional ethics, this model provides a way to be action oriented and respectful of clients—teachers, principals, students, and parents. One teacher in frustration once said that this was all too simple. The reply was: "Yes, it is, and that's the beauty of it."

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Editor's Note: Ro Foege, school social worker, was elected to the Iowa State Legislature in the fall of 1996. He was asked by the IJSSW to write about his first year experience as a state legislator. The article that follows is a personal and political statement about his experience and his viewpoints. It is an inside "look" into the legislative process and offers readers insight into the workings of state government and decision-making issues. It is full of concern about issues that are of paramount importance for school social workers and social workers in general. We assume that other areas of the country have somewhat similar issues and concerns.

REFLECTIONS OF AN IOWA FRESHMAN LEGISLATOR

Representative Ro Foege

August 21, 1997

The long, arduous campaign was over; thank-you's were written to the many dedicated workers; yard signs were gathered up and, along with those legendary "Ro boats," were put in storage. So very many people invested their time, efforts, and contributions to make my election a reality. To this day, I haven't had an opportunity to speak with my opponent since the election, but I would like to commend him. Campaigning is a very intense experience that requires significant sacrifice on the part of oneself and one's family, but the willingness to make that sacrifice in order to seek public office is necessary to maintain a free and open society.

After the campaign, an attempt was made to meet with as many of my constituents as possible. I kept a very busy schedule following the election. I made a commitment to visit the school board meetings and some of the local and county government meetings in the 50th House District before the General Assembly convened. I wanted to hear what my constituents' concerns and issues were, so that I could do my best to represent all parts of my district when my work in the 77th General Assembly began.

On December 4, 1996, the legislative staff held an orientation for the 30 new legislators and their spouses in the Capitol. I was again struck, as I always am, with the beauty of the Iowa Capitol. It is hard to be cynical when one sees the love and pride that our forebears

IJSSW, May 1998

invested in that building. And it is humbling to know that I have been entrusted with the honor of being one of 150 Iowans who will struggle to make decisions that will impact the lives of all Iowans.

The first week of the Iowa legislature was one of ceremony and introductions. The Governor delivered his State of the State address, in which he called for cuts in income taxes, and increased funding for education, juvenile crime programs, and the death penalty.

Unfortunately, he failed to make any proposals for dealing with the corporate-owned factory hog farms that are posing many threats both economically and environmentally in our state. In addition to all the ceremony of swearing-in and speeches by the Governor and Chief Justice, we met with our committees for introductions to one another and to establish rules, meeting schedules, and committee members' priorities.

Committee Appointments

I am very pleased with the committee assignments I received from the Democratic leadership in the House. I am serving on the Committees on Education, Environmental Protection, and Human Resources, as well as the Human Services Appropriations Subcommittee. These assignments are well-matched with my training as a social worker and my 35 years as a practicing social worker with Iowa children and families.

Obviously, there is much concern about welfare reform and the ways in which the new federal laws may impact our state and our counties. What may not be as apparent is that the Human Services Appropriations Subcommittee deals with Medicaid and Medicare. In addition to having considerable impact on the lives of seniors, those Title XIX dollars also impact people with disabilities and their families, the special education system, and the training of medical students.

Taxes were bound to be the centerpiece of the General Assembly. The state coffers are comfortably full, and it will take some clear thinking and common sense to find a balance between tax cuts, which are always politically expedient, and taking care of some of the state's critical obligations, such as unfinished or deteriorating infrastructure and unfunded property tax credits. The real challenge is achieving an acceptable compromise that provides fair tax cuts without jeopardizing our future and the future of the children of Iowa.

ERA

The week of January 31, 1997, was an exciting one in the Iowa House, as we unanimously passed the resolution to add an "Equal

Rights Amendment" to the state constitution. It was exciting for me to be able to co-sign this bill and then vote for it as one of my first votes as a state representative. Future generations of women and girls will benefit, and I was certainly thinking about my 6 month old granddaughter, Lydia, when I cast this vote.

The current Equal Rights Amendment proposal, if approved by voters, will add only the words "and women" to the Iowa State Constitution. The Senate passed its version of the resolution, so Iowans will see the amendment on the ballot in November, 1998. Under Iowa law, a constitutional amendment must pass two successive General Assemblies in identical form before being placed on the ballot for approval by the voters of Iowa. If ratified, the constitution will then read, "All men and women are, by nature, free and equal...."

Child Abuse

I am increasingly concerned with the well-being of Iowa children. A child abuse bill that was passed out of committee dilutes Iowa's definition of abuse. The bill would have opened the definition of child abuse, and I believe that it would put children in more danger. In the new proposal, a child would require medical or mental health intervention to be considered abused. One problem with this definition is that the perpetrator of the abuse is usually the one who would determine if the child needs or obtains medical attention! I met [with medical professionals...pediatricians] who are urging legislators to stop the proposed extreme change in definition.

Fortunately, the child abuse bill passed by the House did not change the current definition. Rather, it directs that Iowa Department of Human Services to convene a group of child abuse experts to develop uniform criteria for identifying what type of injury should be considered a threat to the safety of a child. I objected to the part of this bill that involved changes in the child abuse registry, because I believe it may result in more children being vulnerable to abuse. Child abuse will again be addressed in the House when Senate File 230 comes up for debate.

Remove Best Interests of the Child?

In a matter relating to children, the House adopted a measure to bring Iowa's Child Support Recovery law into alignment with federal welfare reform legislation. There was little disagreement on the portions of the bill that updated the rules and regulations required by the federal legislation. However, we did debate until nearly 11 p.m. one night over a provision to remove "*best interest of the child*" from the list of criteria that a court must consider when determining whether

to honor a request to the court to disestablish someone's legal status as a parent of another person. This provision is not required by federal legislation.

Under the current "*best interest*" language, the court is allowed to consider the age of the child and the relationship between the child and the non-custodial parent when determining whether to disestablish paternity. I was joined by 38 other House members in losing the argument that "*best interest of the child*" is the underpinning of Iowa law regarding children and should be retained as a general direction to the court. Removing this language may be harmful to Iowa's children. It is my hope that the Senate will express its care and concern for Iowa's children by reinstating "*best interest of the child*" language in the Child Support Recovery Act.

Education

For several weeks, I met with my educator colleagues in the House and Senate for the purpose of crafting a 3-year initiative that we have named "Iowa Reads." Our goals are to have every Iowa child reading by the 4th grade, increase academic standards, and make certain that all young students receive the appropriate attention that they need to be successful. The "Iowa Reads" initiative calls for

- *reducing class size* to give students more time with their teachers. Classes of 20 students or less during the early years will give teachers more time to teach and students a better chance to learn.
- *disciplined alternative settings* for disruptive and problem students, allowing good students to learn without disruption and helping problem students become better students.
- *academic standards* that are voluntary and locally controlled to make sure our kids are learning the basic skills they need. Iowa is one of only three states where students are not tested to make sure they are learning the basic skills they need to read and perform simple math. Local schools will decide student achievement goals and assessments to measure success.

Cutting Taxes

With nearly \$1 billion in Iowa's budget surplus, we certainly ought to provide for some tax relief. We need to look at providing tax cuts that go to the middle and low income families of Iowa. Currently, Iowa has one of the most complicated tax systems in the nation, and families in Iowa—those that make \$25,000 to \$75,000 per year—make 50% of the Iowa income but pay 62% of the taxes. It makes the

most sense to reduce regressive taxes such as property and sales taxes first and then reduce the progressive income tax.

According to a study by the national tax group, Citizens for Tax Justice (CTJ), the Iowa tax system is unfair to the poor and middle income people. Martin Ettlinger of CTJ said that while Iowa has a progressive income tax, our overall tax system is regressive. Therefore, an across-the-board income tax cut actually will increase the middle-income Iowan's relative share of the tax burden. For example, he reported that the poorest 20% of Iowans pay 12.3% of their income in state taxes, while the wealthiest 20% pay from 6.1% up to 8.7%. I would like to work to make this more fair by repealing the existing tax penalty for the average Iowa working families rather than increasing the gap with an across-the-board cut.

During the week of February 28, 1997, my Democratic colleagues in the House and I unveiled a plan to cut income taxes in Iowa by \$300 million. This plan was aimed at reducing the tax burden of middle income Iowans. Under this plan, all Iowans would have received a tax cut, but this would target middle class families who are shouldering an unfair share of taxes. For example, this would lower the current top 9.98% marginal tax rate to 6.8% and drop Iowa from having the 4th highest tax rate to the 22nd highest rate in the country. There are two components to the plan. First, the federal deductibility would be eliminated, and then taxes would be reduced for all Iowans. This would truly make Iowa's tax rate more competitive with other states.

The \$300 million tax cut, the largest in Iowa state history, was passed by the House during the week of March 7, 1997. That bill would have made a 15% across-the-board cut in income tax rates. The plan was approved after House Republicans rejected the alternative offered by House Democrats, including myself, which would have targeted relief for middle and low income Iowans. The majority party in the House did not allow our proposal to be debated. The bill that passed the House would have kept Iowa at 8th place. In the end, I voted for the 15% across-the-board income tax cut, because I campaigned to reduce taxes. Although I would much rather have cut the regressive property or sales taxes first, I did campaign to reduce taxes, and this was an opportunity to vote to do just that.

Iowans will receive a \$200 million income tax cut beginning in 1998. This means that each and every Iowan will see their state income taxes decrease by 10%. The bad news is that we missed a golden opportunity to reform our tax structure to make it fairer for the average income earner and to make our tax system less complex. The final bill also did little to improve Iowa's tax ratings versus other

IJSSW, May 1998

states' ratings. The bill, as passed, however, will lower Iowa's rate to 7th highest in the country.

Inheritance Taxes

The bill to eliminate \$45.6 million in inheritance taxes passed both houses of the Iowa Legislature during the first week of February, 1997. There was great momentum to eliminate the Iowa inheritance tax. I believe that we should raise the exemption threshold and exempt immediate family members, but I am not certain that we should eliminate totally the inheritance tax. My concern is that in 1995, the Iowa Department of Revenue and Finance found that about 37% of inheritance taxes are paid by non-Iowans. Should we give over \$30 million of tax relief to non-Iowans when Iowa's own families and children still have many unmet needs?

Homestead Tax Credit

The Governor also proposed that we increase the Homestead Property Tax Credit, and he put \$20 million in his budget for this. The problem with this is that currently the state does not fully fund this credit. School districts, counties, and cities are responsible for funding this credit, and this would again be the case. If the Legislature would follow the Governor's proposal, we again would be passing mandates without fully funding them, and the money would have to come from the local governments. I support the \$20 million increase in funding but not a proposal that would increase the tax burden for local governments and schools. I believe we need property tax cuts, not increases!

Consumer News

My March 22, 1997, update from the Iowa House included some good news and some bad news for consumers. The good news is that a bill I supported, which gives automobile owners more protection from uninsured drivers, passed the House. The law makes it a little easier to force drivers to insure their cars or to provide some other form of financial coverage in case of accidents. But don't give up your non-insured driver coverage! Unfortunately, some folks will still slip through, and when they cause an accident, you could still get stuck.

The bad news is that the Iowa House voted to eliminate the cap on credit card interest rates in Iowa. There will now be no state imposed limit! During the past two years, the lid has been removed on out-of-state credit cards and bank cards. Now, with the interest rate limit removed from local cards, credit card issuers are free to raise their

interest rates as high as they want. Credit card companies may be pleased, but consumers are again the losers, as they often have been in this legislative session.

Highway Speed Limits

The bill raising speed limits on Iowa interstate highways was killed for this session. In one of those gratifying moments when partisan politics gave way to common sense, the Iowa House agreed with the experts who assured us that increasing the speed limit would lead to more highway deaths in Iowa. Surrounding states that have increased speed limits have experienced an increase in fatalities. Those nearby states that did not raise speed limits saw fatalities decrease. Safety, as well as energy conservation, were other considerations for those of us voting to defeat this bill.

Hog Lots—The Big Stink is Not about the Smell

An issue that was not addressed during 1997 was the hog lot regulation. I would have liked to have seen more local control on where these lots are located and an elimination of the nuisance suit protection that these facilities enjoy. Currently, there is far too much potential for a major manure spill, which would pollute our drinking water.

The majority party and the large hog lot producers have argued that the law passed in 1995, which exempted big hog factories from the common law protection of nuisance lawsuits, is working and should be left alone. A judge in Humboldt County changed that. On April 2, 1997, he ruled that three of the four county ordinances do not conflict with state law, thereby, upholding Humboldt County ordinances. As a result the large hog lot producers wanted the law changed, and they wanted the legislature to act before we adjourned. The Humboldt County case is being appealed to the Iowa Supreme Court, so some believe it may be best to wait and see what the high court decides.

This is a monumental issue, because, whatever is decided, it will have an enormous impact on the economic health and quality of life in Iowa. Should we abandon home rule and local control for counties in order to allow these large producers to flourish? Who should be financially responsible for environmental violations? Will producers be granted immunity from lawsuits? The Humboldt County pork producers feel that without the state regulating confinement facilities, livestock production will halt. The Humboldt County Supervisors told us that their ordinances are necessary, because they address local public health concerns. Citizens in their county were

getting sick, and it was determined that the water supply had, in fact, become contaminated by the large confinement facilities.

It should be noted that Humboldt County has about 40% of the approximately 310 agricultural drainage wells in the state. These drainage wells empty into the sinkholes in the flat lands of north-central Iowa; otherwise, the farmland would revert to wetlands and marshes, the natural state of the area before farming. (As a boy, I remember cultivating around some sink holes near Lizard Lake in Pocahontas County, which has about 20% of the total agriculture drainage wells in the state.) Those drainage wells can carry manure and other unwanted materials directly to the aquifers, because they do not provide the normal filtration effect of soil. At the heart of the issue, of course, is the struggle to find a balance between protecting our water and continuing to support pork production in Iowa, especially the production by family farmers.

The pace in the House picked up in mid-April. The most important bills debated and passed in the House during this time included appropriations for some of the major departments in our state government. These include Agriculture and Natural Resources, Human Services, Health and Human Rights, Transportation, and Economic Development.

Agriculture and Natural Resources

The Agriculture and Natural Resources budget was approved at \$47.8 million for the next fiscal year. The bill passed the House by a vote of 58-41. The negative votes were primarily from those of us who did not want the factory hog lot issue ignored. Attempts were made to require inspections of all lagoons once a year, prohibit the construction of earthen lagoons that hold millions of gallons of manure, allow counties to approve the location of an operation, and repeal the nuisance suit protection given the mega-hog operations. I was disappointed that all of our proposals were defeated. We tried to balance the needs of a modern and prosperous livestock industry in Iowa with the well-being of the family farmers and small town dwellers who must live alongside these huge operations.

Transportation Appropriations

While the hog lot issue was ignored in the Agriculture budget, there was plenty of pork to be found in the Transportation appropriations, which passed 71-21. The budget is \$241.8 million. Of this amount \$4.1 million comes from the general fund, and the remainder comes from road funds. The big boosts in this bill will go to

complete four-lane sections of highways in northwest and north-central Iowa. As most of the population of Iowa resides in eastern Iowa, that is where more attention to building and rebuilding roads should be focused.

Health and Human Rights Appropriations and Related Issues

The Health and Human Rights budget appropriated \$86.3 million to seven departments: Commission for the Blind, Civil Rights Commission, Department of Elder Affairs, Governor's Alliance on Substance Abuse, Department of Public Health, Department of Human Rights, and the Veterans Affairs Commission. Attempts failed to increase appropriations to keep frail elderly and Alzheimer's patients in their own homes for a longer period of time. The majority of House members were unable to support \$81,000 in new money for Alzheimer's patients and, yet, several hours later, they were able to find \$100,000 to remove some pylons from the Skunk River. That stinks!

The Human Services budget of \$762.4 million was approved 92-6 in the House. The driving force behind this year's human services budget was an effort to come into compliance with the federal welfare reform legislation. We want welfare reform to work in Iowa, and to do that, we need to have adequate child care/day care in place and effective job training. Both of those areas will be strengthened in this budget. Also, the budget includes a \$2 million increase in community-based juvenile justice programs used to provide intensive supervision to delinquents, to keep them in school and away from further trouble. We were able to budget for additional 38 group home beds. This is helpful so that an out-of-control youngster can be admitted to an appropriate structured facility, and it also removes what is sometimes a very disruptive student from our schools.

Juvenile justice received a great deal of attention this session. With a cap on the number of youth in residential treatment centers, those of us working in public schools know that the juvenile system is entangled with large numbers of students with severe behavior problems who need more specialized services than are available in local community schools. I presented information in the Education and Human Resources Committees about the need for an adequate continuum of in-home and out-of-home services for the more difficult youth of Iowa, so I am pleased that the Governor recognizes the need for increased funding for the juvenile justice system in Iowa.

We heard from Chief Justice Arthur McGiverin as he delivered his State of the Judiciary address. The tremendous increase in criminal cases has put a strain on the courts. He asked the legislature

to consider additional funds to allow the courts to hire the necessary judges to handle both adult and juvenile criminal cases. He also requested improved technology so that the courts can adequately track the payment of fines as well as the general caseload. It was especially gratifying to me that Chief Justice McGiverin specifically named Cedar Rapids Associate District Judge Michael Newmeister as a judge who has implemented innovative uses of technology, which have resulted in improved court services.

My appropriations subcommittee (Human Services) increased the family support subsidy, which provides living expense money to families with a disabled child, to enable the family to care for their child at home rather than placing the child in an institution. The current level of coverage is 304 children, and this increase expands services to about 380 children. As with services to elderly, I am an ardent proponent of community-based services with the family as the primary caretaker, if at all possible.

The House passed two bills dealing with tobacco laws. One bill specifically says that a cigarette vending machine is allowed only in places where the retailer can assure that no one under the age of 21 can enter. The majority party, however, would not even let us debate "pre-emption," the ability of a city or county to develop stronger restrictions on the advertising, distribution, or sales of tobacco products. I supported the local control option, but the tobacco lobbyists won that round! The majority of this legislature appears to believe in local control, *except* when it comes to tobacco issues and hog lots. The other tobacco bill establishes penalties for an underage tobacco user. The first offense is a \$25 fine, the second a \$50 fine, and the third and each consecutive offense, a \$100 fine.

The Governor recommended a large cut in the funds to counties for Juvenile Detention. The collected fines are designated as an attempt to make up the Governor's cuts in the juvenile detention program. Friends of mine in law enforcement have told me that this law will be extremely difficult to enforce, and the fines will be next to impossible to collect, making it another "feel good" bill, which will do little to improve our quality of life.

In other legislative action, we passed a "point of service" bill dealing with health care. "Point of service" would allow employees to choose their own health care professionals rather than being limited to those in a managed care plan. The bill requires insurance companies to offer a "point of service" option to employers buying coverage for their employees, if the employer is providing a limited provider plan to their employees. This bill, according to Principle Insurance Company,

affects almost 50% of the people whom they cover. For John Deere, this affects approximately 70%.

On February 6, 1997, the Iowa House passed a bill making it harder for workers to recover damages from their employer for work-related hearing losses. I voted against the measure, because it makes it virtually impossible for Iowa workers to receive compensation for hearing loss caused by exposure to loud noise at the workplace. Iowans work hard for a living and deserve to be compensated when they are injured on the job, whether they suffer the loss of a limb, the loss of their sight, or the loss of their hearing.

In other legislative news, also, we received the preliminary results of a 2-year study of large-scale swine operations. The study found that certain physical health symptoms may be present in higher rates among those who live close to such operations. Included in the study were air quality, water quality, economic issues, community social issues, and worker health. This was a very inclusive study with 30 scientists from 14 universities involved in the research. This problem deserves the concern and attention of legislators. Health and safety protections of Iowa workers, whether in the factories or on our farms, seem to be eroding. More work needs to be done to protect the health and safety of Iowans.

"FUNNEL" WEEKS

March 14, 1997, began a busy week at the Statehouse, because it was "funnel week," which means that all bills in committee must be voted out, or they will not be taken up this year. The only bills exempt are tax and appropriations bills. Unfortunately, several issues that I would have liked to have seen addressed were lost to this process. I believe that Iowa schools could be made better as the result of a bill that would have decreased the K-3 class sizes. Additionally, a solution to juvenile crime, which focused on prevention and tougher penalties, was introduced by House Democrats. Both of these bills were abandoned by House Republicans.

The week of April 5, 1997, was the second "funnel week." Bills already passed by the Senate had to be passed out of House committees by the end of the week. Many bills that had made it through the first funnel did not make it through this second funnel. The point of the process is to narrow our focus to those bills on which both chambers can arrive at some agreement.

Among the many bills presented for floor debate was one that provided counties with greater flexibility in making spending decisions concerning mental health services. It is the same concept as decategorization, which is what we are already doing in juvenile justice and child welfare services in Linn and Johnson Counties. Decategorization works well in our local counties, so I wholeheartedly supported this concept for mental health services.

One day in April, a bill regarding tort liability was debated until 11:15 p.m. For those of us non-lawyers, tort liability means the ability to sue when you have been hurt physically or economically due to someone else's actions. This legislation, as passed by the House, creates a presumption that the useful life of a product is 12 years, unless a warranty or advertisement states otherwise. Someone harmed by a faulty product that is over 12 years old may rebut this presumption but only by showing clear and convincing evidence, a very high legal standard to meet. This bill also shortens the time for seeking damages for medical malpractice committed against minors. I believe the resulting bill, as amended several times during debate, could be harmful to families and children in obtaining a fair settlement of a loss. Therefore, I could not support the bill on final passage.

FINAL COMMENTS AND REFLECTIONS

The 1997 session of the Iowa Legislature adjourned on April 29, 1997. With a huge surplus and a balanced budget, this could have been the year that Iowa solved some long-standing problems.

- We could have eliminated the middle income tax penalty. Both parties agreed that an income tax cut was needed, but the majority party refused to even discuss real tax reform.
- We could have made our schools better, with smaller classes, improved discipline in the classroom, and higher academic standards; and we could have helped schools with their crumbling infrastructure. Instead, the Republican leadership pushed a bill that gave schools permission to employ 18-year-olds to coach sports and ignored all those other issues.
- We could have attacked the problem of juvenile crime. Bills were proposed that would have offered a two-pronged approach, preventing family breakdown and implementing

tough consequences for those who do commit crimes. What the House leadership opted for was a bill that takes away the driver's licenses of kids who smoke!

- We could have given Iowa families a more responsive and accountable health care delivery system, restricting insurance companies from making important medical decision for our families, thus eliminating their power to force women out of the hospital within 24 hours of a mastectomy. That opportunity was missed.
- The hog lot issue received much attention, but, in the end, the Republican majority decided to ignore the catastrophe that is waiting to happen. The Humboldt County case will go to the Iowa Supreme Court, and future legislation regarding siting of factory hog farms and protecting the drinking water of all Iowans will probably be guided by the Court's decision.

The past four months often have been challenging, sometimes frustrating, but always interesting. I am honored to be a Representative in the Iowa Legislature. I look forward to continuing to wrestle with those problems that face the families of Iowa. In the 1998 session we once again will have the opportunity to address the issues of taxation, education, juvenile crime, health service delivery, and the future of the pork industry in Iowa. Hopefully, we will meet those opportunities with enthusiasm and resolve.

The major frustration during the past session was that cutting taxes became a frenzy. With so much attention on tax cuts, it was difficult to struggle with the needs of Iowa's families and children. Another reality of the legislative process is that the only bills that come to the floor for debate are bills that are expected to be passed by the majority party—and only amendments agreed to by the majority party will be accepted. Keep that in mind, especially if a bill fails on the floor. As with all measures that the legislature approves, they are all subject to the signature or veto of the Governor.

The work of a State Representative is most visible during the legislative session. This summer I have been doing some of the less visible work of a legislator, trying to visit all of the correctional, mental health, and hospital schools operated by the State of Iowa. I do this at my own expense, not on a state expense account.

I have several reasons for these visits. First, as a member of the Human Services Appropriations Subcommittee, I want to know as much as possible about the various state facilities, so that I can be sure that the state provides high quality and cost effective services to the families of Iowa. Secondly, it appears that we will be studying the

possibility of privatizing the correctional system in Iowa. This study is likely to occur during the 1998 session, which begins in January, 1998.

So far, I have had the opportunity to visit the Woodward and Glenwood State Hospitals and Schools, the Iowa Juvenile Home in Toledo, the Iowa Men's Penitentiary in Anamosa (formerly the Iowa Men's Reformatory), the Clarinda and Mount Pleasant Treatment Complexes, and the Cherokee and Independence Mental Health Institutes. The most outstanding impression of my visits so far is that the Iowa institutions have very dedicated and competent staff who are treating and caring for some of Iowa's most vulnerable citizens. In the correctional facilities, we have courageous and well-trained people dealing with inmates. These women and men are a good resource for lawmakers in Iowa when deciding how best to run facilities.

The correctional system is under great stress, because we are passing laws that incarcerate people more quickly and for longer terms than we can build prison beds. By the end of May, 1997, the Iowa prison system population reached 6,657 inmates in facilities designed to hold 4,201 inmates! Because of this rapid growth, there are currently unfilled correctional positions.

While we are busy being tough on crime and criminals, we are inadvertently being tough on the people who work in Iowa's prisons. We need to keep in mind that the staff in charge of these inmates are fathers, mothers, grandparents, aunts, and uncles of Iowa children—our neighbors and friends. We have a responsibility to make Iowa's prisons safe for workers and to provide incentives for those brave folks who take on this work on behalf of you and me.

When the legislature reconvenes and lawmakers are debating whether or not to privatize these facilities, we need to think of the staff while we think of dollars. Questions that need to be asked of us include the following: Can the private sector maintain the level of skills and commitment that our Iowa public employees now have, while delivering services at a lower cost to the taxpayers? Are there ways for the private sector to join with the public sector in providing specific services such as education, job training, and subsequent jobs for inmates? Public safety has to be one of the most important considerations in our deliberations about the correctional system. Given the near disastrous attempt to privatize the transportation of dangerous prisoners, it is obvious that we need to keep the safety of state employees, inmates, and the general public high on our list of concerns regarding the ability of private providers to deliver these complex services.

As a result of my tour of state institutions, I am pleased to inform you that I have been selected to serve on the Human Services Restructuring Committee. This is a committee of both House and Senate members together with five citizens who will study and recommend changes in the structure and delivery of the Department of Human Services. One of the questions that will be addressed is, "How will we utilize the state institutions in the coming years?"

I appeal to my social worker colleagues to get involved in the political process! Most of the decisions about your life and your practice and the lives of the families and individuals with whom you work are made in the political arena. My experience tells me that social workers from all types of settings need to be more involved with the legislative process.

The first step is to find a candidate or member of the Iowa Legislature that you can support. Work for that candidate, raise money for that candidate, and door-knock with that candidate. In the process of doing all of this activity, you naturally will become a friend of your legislator, and you will have access that few others ever will achieve. Lobbying your legislator after the election may be too late! The second step is to keep in touch with your friend and provide your friend, now your representative, with helpful information. And you just might have some fun as well as interesting experiences!

If you would like to spend a day or part of a day with me in the Iowa House of Representatives, feel free to contact me so we can arrange our calendars. You are welcome to visit my house, the State Capitol.

Ro Foege

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VIDEO REVIEW

DAY BY DAY: RAISING THE CHILD WITH AUTISM/PDD

By Joan F. Goodman and Susan Hobav

Guilford Publications, Inc., 1992.

This 60-minute documentary is described as "an unusually honest and intimate look into the daily lives of two preschool children with autism/PDD." The first child featured, Jessica, is a 4 year old with moderate-to-severe autism, language deficits, hyperactivity, and fairly severe behavior problems. The day-to-day struggle with sleeping, mealtimes, and behavior in public are chronicled. The parents relate their concerns, frustrations, and coping strategies.

The second child featured, Elaina, is a 5 ½ year old with PDD (Pervasive Development Disorder), who is largely nonverbal. Elaina's mother is a single parent with one other child. The mother discusses her early denial, her later attempts to "try everything," and her difficulty balancing the needs of her two children.

The video is accompanied by a discussion guide, which presents the producer's viewpoint, a summary of the two vignettes, and suggested issues for discussion. Some of the issues raised are parent-professional communication regarding the diagnosis, parents' reactions to the children's symptoms, techniques and interventions used with these children with some success, and "the ongoing process of acceptance."

This well-done documentary will be very useful to show to individual parents or groups of parents whose children have the diagnosis of Autism or PDD, as well as professionals who work with these parents. Due to the extreme nature of these children's disabilities, it will be less useful with parents of children who are higher functioning or more mildly affected. One criticism I would have is that the parents make almost no mention of accessing community support services, leaving the impression that parents must struggle alone with these disabled children.

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BOOK AND VIDEO REVIEW

**1-2-3 MAGIC: EFFECTIVE DISCIPLINE
FOR CHILDREN 2-12**

By Thomas Phelan, Ph.D. Child Management, Inc., 1996.
104 pages.

1-2-3 Magic is a "simple but not easy" disciplinary program that addresses problems with misbehavior and noncompliance. Developed a number of years ago by Dr. Thomas Phelan, an Illinois psychologist, the program is available in paperback and on videotape. Parents are taught to use counting to three and time out when children display obnoxious behaviors (arguing, whining, tantrums, etc.). The behaviors are called "STOP Behaviors." This approach assumes that parents are the bosses and have the right to discipline. It prohibits excessive talking, "reasoning," arguing, or emotionality on the part of the parent. Virtually all possible pitfalls, roadblocks, and manipulatives that could subvert the system are discussed in detail. Specific child misbehaviors, such as a misbehavior in public, refusal to go to time out, "room wreckers," sibling rivalry, etc. are used to illustrate how 1-2-3 Magic can be used to address any and all child misbehaviors.

Parents are also taught approaches to increase compliant ("START") behaviors. These behaviors include completing homework, chores, instrument practices, etc. Recommended techniques are positive verbal feedback, kitchen timers, the docking (fining) system, natural consequences, and charting.

The book is written in an easy-to-read, "parent friendly" style. I have found parents most eager to watch the videotape, which is 120 minutes in length. The videotape features numerous vignettes of typical parent-child interactions illustrating child misbehavior, ineffective responses, and the application of the "1-2-3 Magic" approach. Actual clients also offer testimonials to the effectiveness of the method. The videotape can be used alone or in conjunction with the book. It can be loaned to individual parents or shown during parenting classes. Due to the length of the video, I have selected several short portions to show to parents attending my parenting classes.

1-2-3 Magic can also be used in schools by teachers. This application is discussed in Phelan's book, but not on the video. I have

IJSSW, May 1998

used Phelan's approach successfully when working with parents who are very frustrated and who rely on ineffective parenting techniques. The program is extremely easy to learn and use, if parents are motivated to adopt a new approach. 1-2-3 Magic is recommended for use with children 2-10 years of age. Phelan's program, Surviving Your Adolescents, is available in paperback.

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